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ABSTRACT

This program plan for 1993 covers all Idaho community rehabilitation programs served by the Idaho Division of Vocational Rehabilitation (IDVR) and the Idaho Commission for the Blind (ICB), and attempts to assess client and rehabilitation service provider needs, to plan for program development, to identify needed changes, and to evaluate the quality and outcomes of rehabilitation services. Introductory information provides an overview, definitions, and service descriptions. Next, state and regional organizational components of the IDVR and the ICB, as well as community rehabilitation programs, are described. Facility assessments and operational planning information are detailed for both the IDVR and the ICB, including identification of 1993 priorities. Specific reports of 12 community rehabilitation programs are provided, organized by each of Idaho's seven regions. Appendices provide additional information including grant and technical assistance information, standards, charts, fee schedules, and accreditation organizations. (DB)

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IDAHO COMMUNITY REHABILITATION PROGRAM PLAN

FOR

FISCAL YEAR 1993

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Submitted by

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STATE BOARD OF EDUCATION**

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Administrator**

and

IDAHO COMMISSION FOR THE BLIND

**Edward J. McHugh
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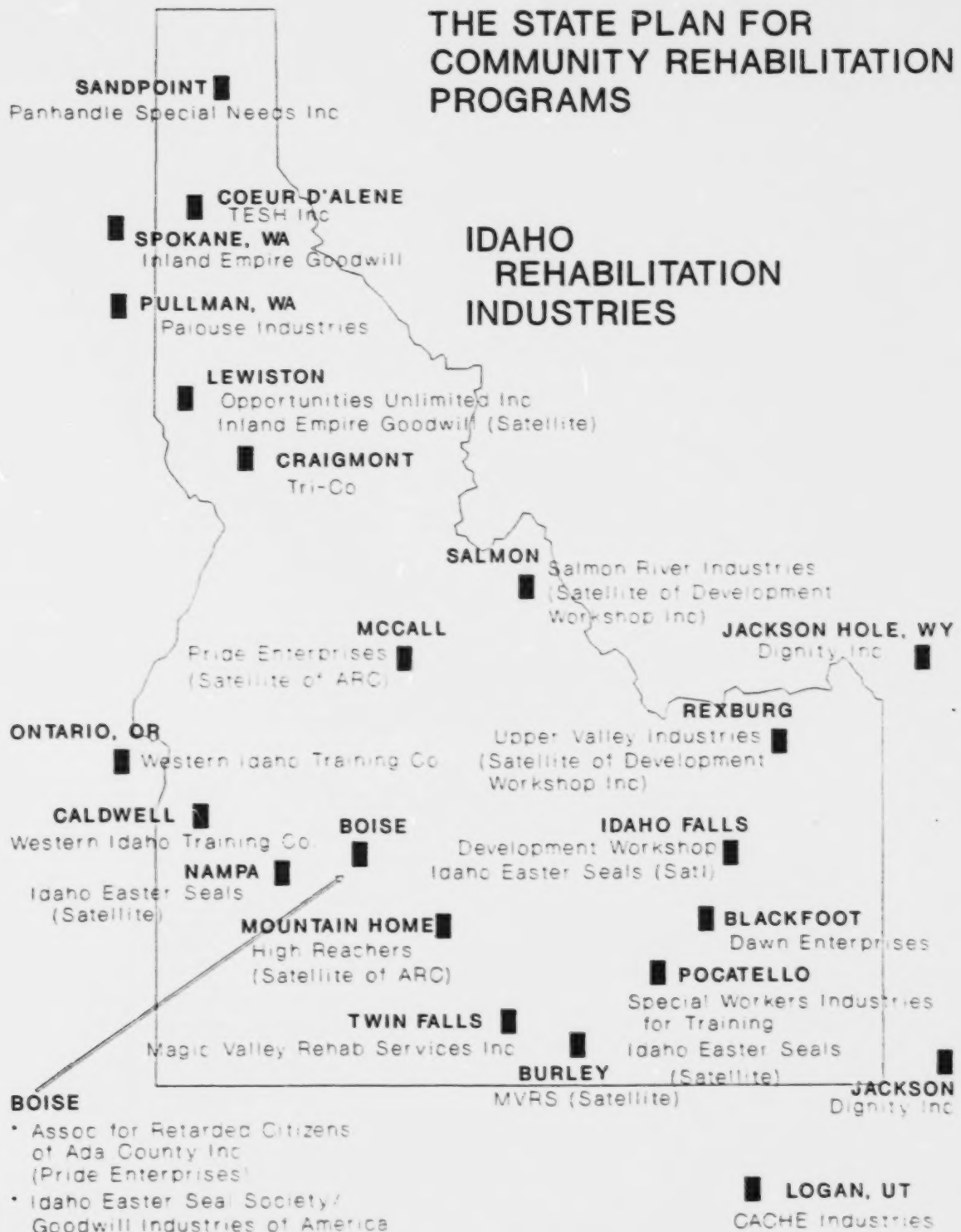
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EC 302484

THE STATE PLAN FOR COMMUNITY REHABILITATION PROGRAMS



1993 Community Rehabilitation Program Plan

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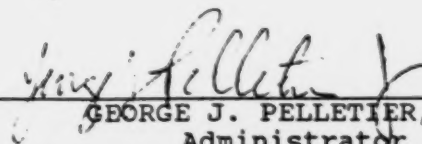
I.
INTRODUCTION

STATEMENT

The network of Community Rehabilitation Programs that serve the clientele of the Idaho Division of Vocational Rehabilitation continue to be a major, and important, member of the State's vocational rehabilitation team. It is clear from a reading of the new Rehabilitation Act that Congress intends that vocational rehabilitation must be played out in integrated, community based settings. The Community Rehabilitation Programs enumerated in this state plan have all demonstrated their long-range commitment to this ideal.

The Idaho Division of Vocational Rehabilitation remains steadfast in its commitment to purchasing work evaluation, work adjustment, community based supported employment services and placement and follow along services only from providers who are CARF (or other recognized accrediting body) certified. These services must be directed toward the ultimate goal of participant employment. The providers listed in this plan all continue to meet this requirement.

A desired outcome of our Division activities with these community based providers for the coming year is the expansion of the menu of services to the rural sections of Idaho. Additionally, we wish to expand, along with the Community Rehabilitation Programs, our and their capacity to serve people with chronic and persistent mental illness.



GEORGE J. PELLETIER, JR.
Administrator
Idaho Division of Vocational Rehabilitation

STATEMENT

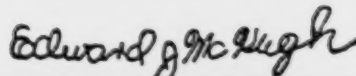
This document includes for the Idaho Commission for the Blind, a report for state fiscal year 1992 (July 1, 1991 through June 30, 1992) and plans for the current fiscal year 1993. It is a communication tool, for and between the Idaho Commission for the Blind and our various partners in the business of rehabilitation. Our intent is to provide a view of the Idaho Commission for the Blind's current utilization and future expectations for rehabilitation services and to match that with the resources of various service providers.

It is especially gratifying to work in collaboration with the Idaho Division of Vocational Rehabilitation in producing a Statewide Facility Plan. ICB recognizes IDVR interum certification and the IDVR facility fee schedule. For more specifics on the Idaho Commission for the Blind, in regard to facilities, one should refer to the Idaho Commission for the Blind Facility and Rehabilitation Service Provider Report from 1990, which is our three year plan and which includes a broad spectrum of actual and potential service providers including rehabilitation facilities, independent living centers, non-profit corporations, private individual contractors and private and public Adult\Child Development Centers.

The ICB provides many in-house services to our clients. This includes an Orientation and Adjustment Center in Boise, offering a six to nine month residential rehabilitation program. We also employ four regional itinerant independent living skills instructors, a statewide job placement specialist and a statewide adaptive technology specialist. The ICB also currently offers in Region I and IIIB, contracts for itinerant independent living rehabilitation services. We are also currently selecting and will be training a rehabilitation facility in the Treasure Valley area to provide specialized evaluation services for the blind.

The rehabilitation needs of the blind are individualized, varied and complex. There is a special need for utilization of facility services for those who are blind and multiply disabled, with such secondary disabilities such as; developmental disability, head injury, amputation, mental illness, hearing impairment, diabetes, renal disease and others.

We will continue to offer assistance to rehabilitation facilities interested in initiating, or improving any rehabilitation services which are specialized or adapted to meet the needs of the blind. The goal of the ICB is to provide quality and comprehensive rehabilitation services leading to employment and independence for the blind of the state and we will continue working closely with service providers to accomplish this goal.



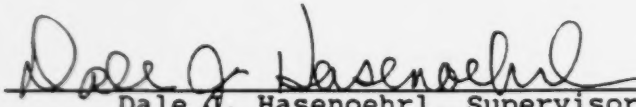
Edward J. McHugh
Administrator

FOREWORD

The State Community Rehabilitation Program Plan is the result of an information gathering, reporting and planning effort between the Idaho Division of Vocational Rehabilitation and Idaho Rehabilitation Industries (Community Rehabilitation Programs). The purpose is to assess client and rehabilitation service provider needs, plan for development of Community Rehabilitation Program services, implement changes, and evaluate the quality and outcomes of rehabilitation services provided to Idahoans with disabilities. This document clearly states Agency direction and intention and includes comprehensive operational plans for continuing development of Community Rehabilitation Programs in each region throughout the State. In addition to the aforementioned, the State Community Rehabilitation Program Plan also addresses the following:

1. Utilization of existing Community Rehabilitation Programs to the maximum extent feasible;
2. Compliance with Architectural Barriers Act of 1968;
3. Provisions for Community Rehabilitation Program establishment and accreditation standards;
4. Inventory of Community Rehabilitation Programs, i.e., services, staffing, and expansion plans;
5. Importance of cooperative agreements;
6. Statewide needs assessment of Community Rehabilitation Program services, capacities, conditions and plans for improvement;
7. Policies, procedures, and fee schedules related to Community Rehabilitation Program services; and

The State Community Rehabilitation Program Plan will serve as both a **resource** and **planning** document for IDVR and Community Rehabilitation Program staff as it provides a broad overview of rehabilitation services, needs, goals/ priorities, and establishes a plan for achievement of such. In addition, the State Community Rehabilitation Program Plan will support the orderly development, expansion, and/or improvement of Community Rehabilitation Programs/services in Idaho.


Dale G. Hasenoehrl, Supervisor
Community Based Programs
Idaho Division of Vocational Rehabilitation

COMMUNITY REHABILITATION PROGRAM

STATEMENT OF INTENT

The Rehabilitation Act of 1973 empowered IDVR to assist and participate in the construction and establishment of Community Rehabilitation Programs. In addition, specific standards were formulated, technical assistance was provided and planning for utilization as well as innovation and future expansion implemented. These Community Rehabilitation Programs today provide a wide array of vocational rehabilitation services to include: Work Evaluation, Work Adjustment, Occupational Skill Training, Supported Employment/Transitional Job Coaching, Projects With Industry Training and Placement/Follow-along services. They may also provide other forms of rehabilitation services such as job site/task analysis and may recommend job-site modifications, Rehabilitation Engineering and/or other technological applications.

The State Community Rehabilitation Program Plan should fulfill its purpose as indicated in the following regulatory excerpts.

The State Plan for Community Rehabilitation Programs provides an inventory of Community Rehabilitation Program services including descriptions of utilization patterns and potential representative of Idaho vocational rehabilitation Community Rehabilitation Program service providers. Complementary to a statewide needs assessment is a list of priorities, short-range goals and objectives and the planned activities relating to new, expanded, or modified Community Rehabilitation Program services as identified (CFR 361.21).

The state Plan also serves as a planning and reporting document in order to ensure Community Rehabilitation Program utilization to the maximum extent feasible in the provision of vocational rehabilitation services. It also ensures appropriate use of these Community Rehabilitation Programs via a cooperative working relationship between Vocational Rehabilitation and Idaho Community Rehabilitation Programs (CFR 361.22).

Minimum standards for Community Rehabilitation Programs and providers of vocational rehabilitation services are to be available and maintained. Those include specific standards for the organization, its programs, property and equipment; in addition to concerns for client safety, health and working conditions. The Plan also affirms compliance with labor law regulations, professional licensure, certifications related to rehabilitation service provision and accessibility per the Architectural Barriers Act (1968) (CFR 361.45).

Establishment or expansion of new or existing Community Rehabilitation Programs will be supported by a needs assessment; and any new establishments will meet minimum state standards, with the primary purpose being to provide vocational rehabilitation services, transitional, or extended employment to individuals with disability(ies). Staffing assistance may be provided to new, or

expanded, programs only; and all Community Rehabilitation Programs already established must implement an Affirmative Action Plan (CFR 361.51).

In this joint venture, we merge special skills and expertise whereby these talents, combined with the efforts of other rehabilitation professionals/specialists, form a holistic/comprehensive service delivery system.

The collaborative effort between IDVR and Community Rehabilitation Programs reflects the intent of the Rehabilitation Act whereby there exists a complementary partnership that greatly enhances opportunities for employment and the advancement of individuals with disabilities.

OVERVIEW OF COMMUNITY REHABILITATION PROGRAMS/INDUSTRIES

Establishment of Community Rehabilitation Programs

Under the Basic Support Program, Section 103 of the Vocational Rehabilitation Act, State agencies may establish Community Rehabilitation Programs. Establishment means construction, expansion, or alteration of existing buildings in order to adapt or to increase their effectiveness for rehabilitation purposes. State agencies may also provide assistance in the acquisition of initial equipment and staffing of a Community Rehabilitation Program.

Accreditation Standards and Criteria for Community Rehabilitation Programs/Industries

Through the provision of rehabilitation services by Community Rehabilitation Programs/Industries, we are able to impact numerous individuals experiencing disability in need of various services. In order to maintain effective programs and appropriate services, certain minimum standards for Community Rehabilitation Programs are outlined in the State Community Rehabilitation Program Plan's Appendices.

Utilization of Community Rehabilitation Programs/Industries

The Rehabilitation Act of 1973 and Amendments of 1986 as defined in Federal regulations CFR 361.21 and CFR 361.22 specify that State DVR units will maximize Community Rehabilitation Program utilization and resource development. This means we are partners with Community Rehabilitation Programs in the provision of services to individuals experiencing disability(ies). We also have a mutual responsibility to ensure strategic use and development of Community Rehabilitation Programs. These goals may be accomplished through effective assessment and operational planning as set forth in our State Communication Rehabilitation Program Plan.

Community Rehabilitation Program Services

The Rehabilitation Act defines a Community Rehabilitation Program as a program that provides directly or facilitates the provision of vocational rehabilitation services to individuals with disabilities, and that provides singularly or in combination, for an individual with a disability to enable the individual to maximize opportunities for employment, including career advancement.

- A. Medical, psychiatric, psychological, social and vocational services that are provided under one management;
- B. Testing, fitting or training in the use of prosthetic or orthotic devices;
- C. Recreational therapy;
- D. Physical and occupational therapy;
- E. Speech, language, and hearing therapy;
- F. Psychiatric, psychological, and social services, including positive behavior management;
- G. Assessment for determining eligibility and vocational rehabilitation needs;
- H. Rehabilitation technology;
- I. Job development, placement and retention services;
- J. Evaluation or control of specific disabilities;
- K. Orientation and mobility services for individuals who are blind;
- L. Extended employment;
- M. Psychosocial rehabilitation services;
- N. Supported employment services and extended services;
- O. Services to family members when necessary for the vocational rehabilitation of the individual;
- P. Personal assistant services; or
- Q. Services similar to those services described in sub-paragraph A through P.

II.

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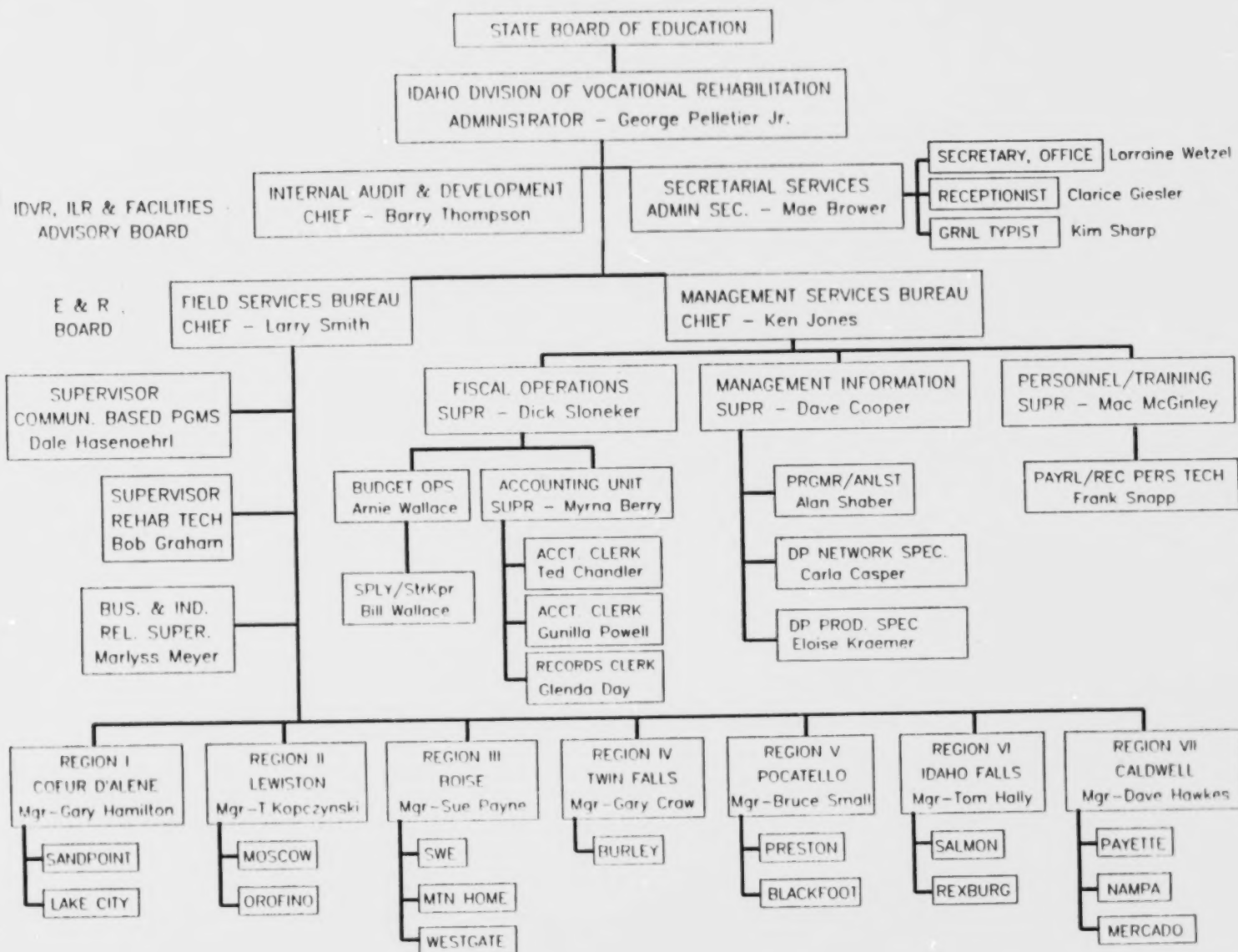
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465-8414

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Vocational Rehabilitation Programs

Vocational Rehabilitation General Program Description. The Division exists to identify and provide services to vocationally disabled Idahoans to assist them in securing and maintaining rewarding and productive employment. The goal of the program is to place the person in the work force. To be eligible for program services:

- 1) A person must have a physical or mental disability which results in a substantial impediment to employment; and
- 2) Can benefit in terms of an employment outcome from Vocational Rehabilitation services provided.

Vocational Rehabilitation is an "individualized program" that allows the Vocational Rehabilitation counselor and the client to develop a personal rehabilitation Plan. Examples of rehabilitation services that may be available are personal and vocational counseling, vocational evaluation, medical assistance including physical aids, training, tools and licenses, transportation and maintenance, job placement and follow-along, and other goods and services required by the person to become employed. Idaho Vocational Rehabilitation stresses services instead of support, rehabilitation instead of relief, and training for work instead of dependency. The client's ability to pay for rehabilitation services is considered in the cost of the rehabilitation program. Vocational Rehabilitation can assist people who want to work to locate suitable employment.

Vocational Rehabilitation Services

* **Professional Counseling** in adjustment to disability, vocational exploration, and planning for re-entry into the world of work.

* **Evaluation** to determine vocational strengths and weaknesses. Such individual evaluation is used to plan for services and employment alternatives.

* **Medical Assistance** can be provided if it is needed to secure employment. Surgeries and hospitalization, mental health, physical and occupational therapy, prosthesis and orthotics may also be available.

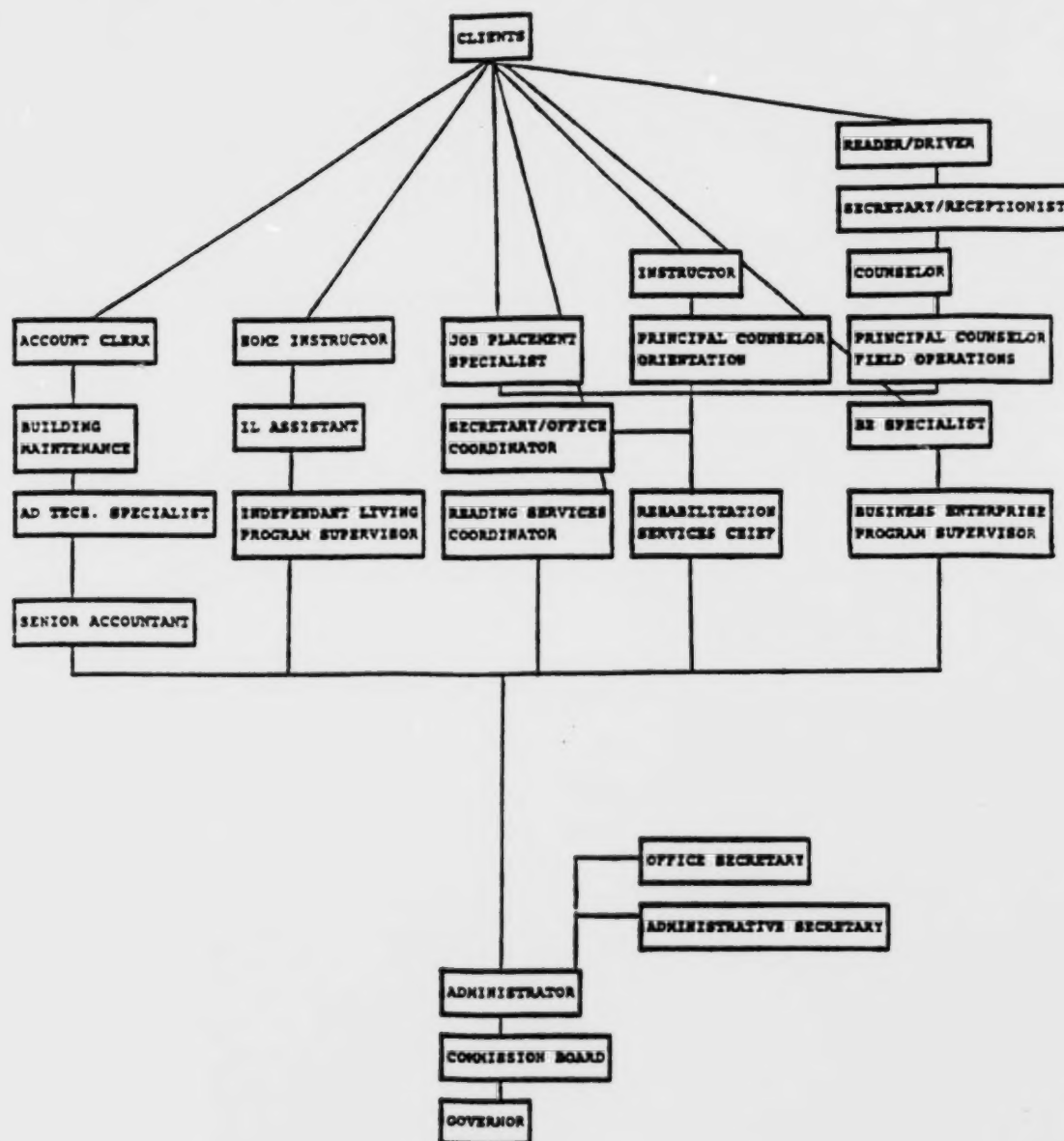
* **Training** for those individuals who will need a career change because of disability. Such training can involve study in colleges, trade schools, on-the-job training, vocational-technical schools, etc.

* **Tools and Licenses** can be provided if they are needed to enter a specific trade or profession.

* **Job Development and Placement** is a specialty service in which the client and the Vocational Rehabilitation Counselor work together in job location and employment. Placement in a suitable job is the goal of the vocational rehabilitation program.

* **Follow-along** services can be extremely important to ensure that the job placement is successful. Such follow-along can solve any job problems that may occur.

ICB ORGANIZATIONAL CHART



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DESCRIPTION AND PURPOSE OF THE IDAHO COMMISSION FOR THE BLIND

The Commission For the Blind, is a state and federally funded agency providing a full range of services to eligible legally blind and others who qualify for ICB services. Our goals are to assist in providing all persons who are blind or visually impaired, the opportunity to identify their individual vocational, social, and personal goals, and to become self sufficient.

The blind and visually impaired, like the sighted, should be judged according to their full range of talents , abilities, shortcomings, and weaknesses. A person who is blind or visually impaired can be as capable as sighted counterparts, given proper training and understanding of blindness.

The state office of ICB is located a few blocks west of downtown Boise at 341 West Washington. We have five regional offices: Boise, Coeur D'Alene, Lewiston, Pocatello, and Twin Falls. Programs and special service include the Orientation and Adjustment Center, Vocational Rehabilitation Services, Independent Living Services, Business Enterprise Program, Braille Library, Reading and Taping Services, Prevention Of Blindness Services, an Adaptive Technology Specialist and Job Placement Specialist. The following is a more complete description of the various programs and specialties:

Orientation and Adjustment Center- This center provides intensive instruction in skills to learn alternative techniques to cope with blindness. These skills enable a individual who is blind or visually impaired to participate fully in the mainstream of society.

Business Enterprise Program- Interested blind or visually impaired individuals may receive training in accounting and management procedures, supplies, equipment, and initial stock. This training enables individuals to manage and operate food service located in public buildings throughout Idaho.

Vocational Rehabilitation Services- provides comprehensive services to enable individuals to access employment both in and out of the home.

Reading and Taping Services- Volunteer help is recruited to produce reading materials on tape for blind or visually impaired individuals statewide who cannot read print. Also, volunteers are utilized to broadcast the Idaho Statesman and other current materials on the radio. Radio reading is limited to a one hundred mile radius of Boise at this time.

Prevention Of Blindness Services- The main focus of this program is to provide financial assistance and services to individuals who are in danger of loosing their sight.

Independent Living Services- Services are designed to assist blind or visually impaired individuals to function more independently in their family or home. This program enables an individual to gain control over one's life based on the choice of acceptable options that minimize reliance on others in making decisions and in performing everyday activities.

Adaptive Technology Specialist- The ICB Adaptive Technology Specialist provide services statewide on computer access equipment and other technology issues.

Job Placement Specialist- The Job Placement Specialist provides statewide placement services, offers technical assistance to regional counselors and employers, serves as trainer in job seeking and job keeping skills, researches job markets and develops employee contacts, acts as emissary to rehabilitation facilities.

A black and white map of Idaho illustrating its county and regional boundaries as of October 1, 1992. The state is divided into six distinct regions, each labeled with bold capital letters. Region 1, Coeur d'Alene, covers the northernmost part of the state. Region 2, Lewiston, is located south of Region 1. Region 3B, Treasure Valley, is situated in the west-central area. Region 3A, Boise, encompasses the central valley around Boise. Region 4, Twin Falls, occupies the southern portion of the state. Region 5, Pocatello, is located in the southeast. Region 6, Idaho Falls, is in the northeast. Individual counties are also labeled throughout the map, such as Blaine, Bannock, and Butte. A dashed horizontal line runs across the middle of the state, likely representing the 43rd parallel north.

REHABILITATION INDUSTRIES

Region I

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Panhandle Special Needs
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Rehab. Program Coordinator
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743-3414

Charlotte Dasenbrock, Director
Tri-Co (WOW)
Craigmont, ID 83523
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343-5583

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High Reachers
Satellite of ARC/Boise
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Mountain Home, ID 83647
587-5804

Marilyn Williams, Director
PRIDE Enterprises, Inc.
Satellite of ARC/Boise
McCall, ID 83638
634-2391

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Easter Seal/Goodwill
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Boise, ID 83705

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Magic Valley Rehab. Services
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Twin Falls, ID 83301
734-4112

Region V

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Special Workers Industries
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COMMUNITY REHABILITATION PROGRAMS

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OUT OF STATE PROGRAMS

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Community Rehabilitation Program Service Description

A Community Rehabilitation Program is the unique combination of a rehabilitation agency and free enterprise through which rehabilitation is accomplished.

Community Rehabilitation Programs are non-profit corporations. Each program has a board of directors composed of citizens from the geographic area the program serves. The directors, who volunteer their time and energy, ensure each program provides services uniquely designed to best meet the needs of disabled and disadvantaged persons from their respective communities. The directors are also responsible for the development of policies, procedures, and the program's day-to-day operations.

The State of Idaho, Department of Health and Welfare, the Idaho Division of Vocational Rehabilitation, the Idaho Commission for the Blind, school districts, other agencies and private individuals, purchase various services from Community Rehabilitation Programs via a fee schedule. Community Rehabilitation Programs also secure grants from state, federal, and other private sources to develop and implement projects to serve specific disability groups.

Revenues generated from production activities comprise the remainder of the income which forms the financial base for most Community Rehabilitation Programs. Community Rehabilitation Programs contract with various government agencies and private businesses throughout the United States to provide a myriad of products and services. Additional contracts are constantly being investigated to expand the types of training available and to generate additional production income.

Idaho's Community Rehabilitation Programs are an important component of the service delivery continuum that is structured to give people with disabilities increased skills that will improve their social and economic opportunities. Idaho's Community Rehabilitation Programs are proud to be a part of the system that serves "People With Abilities".

IDAHO COMMUNITY REHABILITATION PROGRAMS

The purpose of a Community Rehabilitation Program is to provide quality vocational and developmental services to adults with disabilities to increase their potential for competitive employment and independent living.

The following services are provided by Idaho Rehabilitation Industries:

Adult Day Activity: Designed to provide therapeutic activities for severely handicapped adults. A program to develop, maintain or maximize an individual's independent functioning in self-care, socialization, communication, education and pre-vocational skills.

Community/Occupational Skill Training: Provides a specific training program for those who are entering the competitive job market in such occupations as food services, janitorial and motel maid.

Transition: Assists special education students in their transition from school to work by providing training at a business in the student's community to improve work habits and behaviors.

Community Supported Employment: Provides severely disabled individuals with the ability to function within a community based employment site using structured one-on-one job training, work adjustment services and long-term support.

Extended Evaluation: Provides assessment of vocational skills within the work setting.

Independent Living/Residential: Provides independent living skills training within a semi-independent environment.

Placement and Follow-Along: Provides vocational counseling, job seeking skills training, job development, and Community Rehabilitation Program placement services for those pursuing gainful employment.

Projects With Industry: A project designed to develop partnerships between industry and Community Rehabilitation Programs. Provides occupational skill training in various identified occupations. Training occurs within a classroom setting, at the Community Rehabilitation Program and at community based work sites. Length of employment can vary according to individual needs.

Vocational Evaluation: Provides assessment of vocational skills through the use of standardized psychometric tests and work samples. Testing includes assessment of individual skills, attitudes, habits and tolerances.

Work Services: Provides pre-vocational skill training, actual work experience, and assistance in refining current vocational abilities for individuals who presently do not meet industrial standards.

Work Adjustment: A short-term program designed to provide assistance in behavioral and work adjustment for those with potential to become gainfully employed or involved in sheltered employment.

III.

COMMUNITY REHABILITATION PROGRAM ASSESSMENT AND OPERATIONAL PLANNING

The IDVR and ICB sections consist of information that will impact the development, modification or expansion of Community Rehabilitation Programs and services in Idaho for citizens with disabilities. Included in the IDVR section are the following components:

- 1) Introduction
- 2) Guidelines for Operational Planning
- 3) IDVR/Community Rehabilitation Program Planning Assessment
- 4) Regional Operational Plans
- 5) Statewide Priorities (Summary)
- 6) Periodic Review Schedule

**INTRODUCTION
TO
IDVR ASSESSMENT AND PLANNING**

IDVR Regional Managers and Community Rehabilitation Program Directors were surveyed this year regarding their perceptions and needs relating to program services.

There currently are 19 Community Rehabilitation Programs (including satellites) serving Idaho. They provide rehabilitation services primarily to IDVR, consumers and others in need of their program services such as Health & Welfare, the Industrial Commission, the Idaho Commission for the Blind and other Business/Industry programs.

This year's IDVR planning assessments provide a region-by-region analysis of operational issues, goals, performance indicators, action plans, and organizational and community resources. As a result, this year's information will be an integral part of Community Rehabilitation Program planning activities during 1993 and should contribute to organized Community Rehabilitation Program growth and development in the future.

**GUIDELINES FOR COMPLETION OF THE
COMMUNITY REHABILITATION PROGRAM
PLANNING ASSESSMENT AND OPERATIONAL PLANS**

Suggested Reference Materials

- Organizational strategic plans
- Previous year's State Facility Plan
- Annual reviews/evaluations (Executive Summaries)
- Community Rehabilitation Program/IDVR staff questionnaires
- Community Rehabilitation Program/agency wish lists (optional)

Assessment

Section I (Operational Analysis)

Consider all pertinent Community Rehabilitation Program/VR issues or concerns identified in reference materials or otherwise when completing this section.

Section II (Goals)

Based upon your analysis in Section I, please prioritize those primary results, i.e., products, services, or outcomes that you desire regionally.

Section III (Performance Indicators)

With regard to the priority results (products, services, or outcomes) desired, please indicate for each factor of performance -- qualitative or quantitative -- that would indicate when desired results are being achieved, or list specific outcomes or standards of performance expected for each goal.

Section IV (Action Plans)

List activities necessary to accomplish each objective.

Section V (Resources)

Identify those resources necessary and/or available to accomplish each goal identified.

Operational Planning

Each Operational Plan should 1) specify the needs identified; 2) list desired goals; and thereafter address each goal with A. Performance Indicators, B. Action Plans, and C. Community Resources.

1993

COMMUNITY REHABILITATION PROGRAM PLANNING ASSESSMENT

IDVR REGION _____
FACILITY _____
DATE _____
COMPLETED BY _____

SECTION I. OPERATIONAL ANALYSIS

Rehabilitation Outcomes

1. Based upon reported client wages, hours, benefits, job appropriateness, level of independence/self-reliance, and integration, are we achieving quality outcomes?

Yes _____ Comments _____
No _____

Efficiency

2. Based upon an analysis of the average length of client service, (please indicate the time frame for each) in work evaluation _____, work adjustment _____, community based training _____, and skill training _____, are we achieving expected goals and outcomes in a reasonable and timely manner?

Yes _____ Comments _____
No _____

Partnerships

3. Does there exist a positive ongoing relationship between IDVR/Community Rehabilitation Program staff?

Yes _____ Comments _____
No _____

Consumer Focus/Interpersonal Skills

4. Base upon multiple levels of the client's employment readiness, participation in planning, involvement in placement/support services identification, self-advocacy and coping skills, are Community Rehabilitation Programs flexible enough to adapt to the client's needs, thereby ensuring high quality in terms of the measures of performance?

Yes _____ Comments _____
No _____

Services/Availability

5. In your region, are adequate Community Rehabilitation Program services provided given identified client needs, and are they available to all prospective clients?

Yes _____ Comments _____
No _____

Program Expansion/Modification

6. In terms of maximizing Community Rehabilitation Program potential, do you see a need for establishment, construction, or modification of existing Community Rehabilitation Programs, programs, or services?

Yes _____ Comments _____
No _____

Utilization Patterns

7. Based upon current utilization patterns, do you perceive a need to further maximize Community Rehabilitation Programs? If yes, how?

Yes _____ Comments _____
No _____

Program Accommodations

8. In terms of programs and/or accommodations specific to VR/Community Rehabilitation Program client needs, do you see a need for technical assistance and/or staff training?

Yes _____ Comments _____
No _____

Strategic Goals

9. Based upon a review of your agency's or Community Rehabilitation Program's strategic plans, are there strategic goals or objectives specific to your region that ought to be included in this year's State Community Rehabilitation Program Plan?

Yes _____ Comments _____
No _____

Prior Planned Goals and Objectives

10. Based upon your review of the previous year's State Community Rehabilitation Program Plan, are there goals and objectives specific to your regions that need to be continued in the new fiscal year's Community Rehabilitation Program plan?

Yes _____ Comments _____
No _____ _____

SECTION II. GOALS

Based upon your operational analysis of the elements in SECTION I, what would you identify as the goals needed, or expected, in your region this year? (Please prioritize)

Comments _____

SECTION III. PERFORMANCE INDICATORS

List the overall measurable results expected for each identified goal (SECTION II), i.e., unit, program, time frame, output, or a standard of performance that would indicate the desired results are being met.

Comments _____

SECTION IV. ACTION PLAN

Please outline specific activities and events necessary to achieve the objectives identified, i.e., time frames for accomplishment, assignments, sequenced events, etc.

Comments _____

SECTION V. ORGANIZATIONAL AND COMMUNITY RESOURCES

Based upon the priority goals and objectives that you have identified in your region for inclusion in this year's State Community Rehabilitation Program Plan, please identify organizational and/or community resources that may be necessary in order to achieve the desired outcomes.

Comments _____

THE FOLLOWING PAGES
CONTAIN THE
OPERATIONAL PLANS

Region I
OPERATIONAL PLAN
1993

IDVR Office: Sandpoint (Satellite)
Facility: PSNI/Sandpoint
Planners: Gary Hamilton/Jim Howard/Roger Stanton

I. Operational Analysis (Needs identified)

Program Expansion/Modification: Continuous evaluation.
Always a need for modification on a case-by-case basis.

Program Accommodations: Specific local training for TBI and
Chronic Mental Illness placement.

Strategic Goals: Development of a local Transition Orientation
Week during the first week of school. This will be
represented by VR, PSNI, and all other related agencies.

Prior Planned Goals and Objectives: Expansion to other areas
has been accomplished.

II. Priority Result Areas (Expectations, outcomes, etc.)

Planning meeting which will be held to set up the Transition
Orientation Week.

III. Performance Indicators and Objectives (Results expected)

Meeting in February to discuss orientation meeting.
Increased referrals of transition students and increased
success into employment.

IV. Action Plan (Activities)

Coordinate planning meeting with agencies and develop appropriate
agenda and speakers.

V. Community Strengths & Resources (Supports)

Lots of interest in transition with school and other agencies.
Tremendous community support for this type of activity.

Region I
OPERATIONAL PLAN

1993

IDVR Office: Coeur d'Alene
Facility: TESH Industries
Planners: Gary Hamilton/Ken Korczyk

I. Operational Analysis (Needs identified)

Program Expansion/Modification: Expansion of referral to all programs in Coeur d'Alene. Further utilization of available services in St. Maries.

II. Priority Result Areas (Expectations, outcomes, etc.)

10% increase in overall referrals into programs.

III. Performance Indicators and Objectives (Measurable results expected)

Increased development of community-based evaluation and work adjustment sites.

IV. Action Plan (Activities)

1. TESH staff to provide follow up on marketing plans for Coeur d'Alene during October.
2. Increase in marketing activities for VR and TESH.
3. Brainstorming meeting with combined staff about increasing utilization.
4. Start having monthly meetings with TESH staff and counselors about issues related to increased services. First one conducted in October.

V. Community Strengths & Resources (Supports)

Continued accessing of all area agencies and service groups for possible referrals.

Region II
OPERATIONAL PLAN

1993

IDVR Office: Lewiston
Facility: Inland Empire Goodwill, Lewiston
Planners: Tim Kopczynksi and Jerry Suesz

I. Operational Analysis (Needs identified)

The following are pertinent facility/VR issues for the coming year:

- 1) Maintain ongoing communication with Goodwill staff, program administrator.
- 2) Sufficient justification for program extension.
- 3) A sufficient variety of quality evaluation experiences and work adjustment sites.
- 4) Community-based training sites developed on a timely basis.

II. Priority Result Areas (Expectations, outcomes, etc.)

- 1) Maintain good communication with the Goodwill staff, to include regular meetings with the program administrator. Assure the objectives of the meetings are being met. Utilize all necessary agency and facility resources of staff and material to meet the objectives. Evaluate the results to determine success.
- 2) Establish agreed upon rationale for program extension justification. Communicate this in each oral and written manner. Rationale would need to be forthcoming at least one week before program was due to terminate. Necessary resources would include the client, employer or supervisor, facility worker and VRC.
- 3) Assure, through agreement between facility and VR local administration that a sufficient variety of quality evaluation experiences and work adjustment sites exist. Each case may have individual needs, and thus require individual consideration based on these needs. Necessary resources include development of additional evaluation sites or techniques, and unusual or additional WA sites as the situation demands.

III. Performance Indicators and Objectives (Measurable results expected)

IV. Action Plan (Activities)

V. Community Strengths & Resources (Supports)

Region II

OPERATIONAL PLAN

1993

IDVR Office: Lewiston

Facility: Opportunities Unlimited, Inc.

Planners: Tim Kopczynksi and Ron Ruppe

I. Operational Analysis (Needs identified)

The following are pertinent facility/VR issues for the coming year:

- 1) Maintain ongoing communication with OUI staff and administration.
- 2) Sufficient justification for program extension.
- 3) A sufficient variety of quality evaluation experiences and work adjustment sites.
- 4) Community-based training sites developed on a timely basis.

II. Priority Result Areas (Expectations, outcomes, etc.)

- 1) Maintain good communication with OUI staff, to include monthly meetings with the administrator. Assure the objectives of the meetings are being met. Utilize all necessary agency and facility resources of staff and material to meet the objectives. Evaluate the results to determine success.
- 2) Establish agreed upon rationale for program extension justification. Communicate this in each oral and written manner. Rationale would need to be forthcoming at least one week before program was due to terminate. Necessary resources would include the client, employer or supervisor, facility worker and VRC.
- 3) Assure, through agreement between facility and VR local administration, that a sufficient variety of quality evaluation experiences and work adjustment sites exist. Each case may have individual needs, and thus require individual consideration based on these needs. Necessary resources include development of additional evaluation sites or tools, and unusual or additional WA sites as the situation demands.

- 4) Assure, through agreement between Community Rehabilitation Program and VR local administration, that a sufficient variety of quality CSE sites are developed on a timely basis to meet the individual needs of our clients. These will be identified and discussed as appropriate prior to placement of clients into a work site.

III. Performance Indicators and Objectives (Measurable results expected)

IV. Action Plan (Activities)

V. Community Strengths & Resources (Supports)

Region III
OPERATIONAL PLAN

1993

IDVR Office: Boise

Facility: Easter Seal/Goodwill Industries

Planners: Sue Payne/Donna Grummer and Mitzi Meacham

I. Operational Analysis (Needs identified)

- 1) Increased teamwork between Easter Seal and VR staff.
- 2) Increased referrals and placements.
- 3) Investigative strategy for CSE placements for people with severe disabilities.

II. Priority Result Areas (Expectations, outcomes, etc.)

- 1) Monthly VR counselor, client and Easter Seal staffings.
- 2) A Voc. Rehab. team member on Easter Seal quality assurance, program evaluation and Business Advisory Council committees.

III. Performance Indicators and Objectives (Measurable results expected)

- 1) Decrease in paper work process problems.
- 2) Decrease in communication issues.
- 3) Quarterly joint staff meetings between VR and Easter Seal.
- 4) Increase referrals and placements by 25%.

IV. Action Plan (Activities)

- 1) Quarterly meetings with VR and Easter Seal to review the Community Rehabilitation Program plan.

V. Community Strengths & Resources (Supports)

Coordination and cooperation between VR, the Community Rehabilitation Program, other community agencies, clients and employers.

Region III
OPERATIONAL PLAN

1993

IDVR Office: Boise

Facility: PRIDE

Planner(s): Sue Payne, Bob Edwards and Linda Watson

I. Operational Analysis (Needs identified)

- 1) Maintain ongoing communication.
- 2) Investigate strategies for CSE implementation, especially concerning the long term support.
- 3) Increase VR involvement with facility services in Mountain Home.

II. Priority Result Areas (Expectations, outcomes, etc.)

- 1) Reduced reliance on limited long term maintenance funding for CSE through Health & Welfare.
- 2) Establish quarterly joint staff meetings to encourage continued staff interaction.

III. Performance Indicators and Objectives (Measurable results expected)

- 1) Encourage earlier introduction of natural supports for CSE.
- 2) Increase VR referrals and PRIDE placements in Mountain Home.

IV. Action Plan (Activities)

- 1) Quarterly meetings between VR and PRIDE to maintain good cooperation and communication.

V. Community Strengths & Resources (Supports)

Coordination and cooperation between VR, the Community Rehabilitation Program, other community agencies, clients and employers.

Region IV

OPERATIONAL PLAN

1993

IDVR Office: Twin Falls/Burley
Facility: Magic Valley Rehabilitation Services
Planners: Gary W. Craw and John Bodden

I. Operational Analysis (Needs identified)

Efficiency: VR authorizations for client services to be received by facility in a timely fashion per the following guidelines:

Evaluation - Burley/Rupert: Two weeks prior to start date.
Twin Falls: Prior to scheduled start date.

Work Adjustment - Twin/Burley: Prior to scheduled start date.

Community Based Services - Twin/Burley: Prior to scheduled start date.

Placement & Follow Along - Twin/Burley: Prior to scheduled start date.

Partnerships: Improved teamwork (leading to better client outcomes) to include improved communication/coordination between MVRs and IDVR staffs (emphasis area Burley).

Service Availability: To improve consistency of referrals for "in-house" evaluation and increased options for "community based" work evaluation when appropriate.

Utilization Patterns: To improve consistent and appropriate utilization of placement/follow-along services at MVRs by all counselors.

Program Accommodations: To improve staff awareness of deaf culture issues and to facilitate inclusion of deaf populations in ADL training strategies.

II. Priority Result Areas (Expectations, outcomes, etc.)

1. To minimize late authorizations (less than 5% error rate).
2. To increase mutual staff appreciation and understanding.
- 3a. To minimize time frames for clients awaiting evaluation to less than six weeks.
- 3b. To minimize client transportation barriers.
4. To develop a consistent flow of referrals for all assisted placements (to include supported employment and direct

II. Priority Result Areas (Expectations, outcomes, etc.)

4. competitive placements) and to increase percentage of referrals by all counselors.
5. To improve and increase skills and qualifications of ESS staff.

III. Performance Indicators and Objectives (Measurable results expected)

1. To minimize late authorizations (less than 5% error rate).
2. To increase mutual staff appreciation and understanding.
- 3a. To minimize time frames for clients awaiting evaluation to less than six weeks.
- 3b. To minimize client transportation barriers.
4. To develop a consistent flow of referrals for all assisted placements (to include supported employment and direct competitive placements) and to increase percentage of referrals by all counselors.
5. To improve and increase skills and qualifications of ESS staff.

IV. Action Plan (Activities)

1. MVRS to monitor number of late P/A's received.
2. Joint in-service training on team building by mid-winter 1993.
- 3a. A. Counselors will identify on a case to case basis by January 1, 1993 individuals beyond six weeks.
B. MVRS to consider increase in evaluation staff based upon review of utilization pattern at end of FFY 93.
- 3.b A. Alternative transportation to be explored by staff in order to provide additional client community based volunteer support by January 1, 1993.
B. IDVR/MVRS coordination per group services to rural communities.
4. A. IDVR staff to be provided training for the use of placement and follow-along services by January 1, 1993.
B. Assess percentage of counselors utilizing placement services by January 1, 1993.
5. To provide training for MVRS staff by mid-winter or spring 1993.

V. Community Strengths & Resources (Supports)

1. MVRs and IDVR staff collaboration.
2. IDVR/MVRs and BSU management services institute.
- 3a. IDVR and MVRs Staff Collaboration.
- 3b. IDVR and MVRs staff collaboration.
4. IDVR management and research and training center materials.
5. Annual transition planning meeting at ISDB, IDVR and Western Washington (RCEP).

Region V

OPERATIONAL PLAN

1993

IDVR Office: Pocatello

Facility: SWIFT

Planners: Bruce Small, Richard Kaupp, Joe Napier

I. Operational Analysis (Needs identified)

Rehabilitation Outcomes: Quality rehabilitation outcomes were achieved this past year. SWIFT's JTPA program trained and placed individuals in a variety of jobs averaging \$4.53 per hour, many positions including benefits. Jobs have been well matched with clients' interests and abilities. However, there does exist a need to increase non-JTPA/CSE referrals for placement services.

Partnerships: There exists a positive ongoing relationship between VR and SWIFT. Communication at all levels has significantly improved.

Consumer Focus/Interpersonal Skills: Consumers are participating in the planning and development of their rehabilitation plans. Job seeking and job survival skill training has been expanded and refined. There is a need to develop and implement a consumer satisfaction and post-discharge survey/evaluation.

Services/Availability: SWIFT services overall are readily available to all VR referrals. Through VR grants additional vocational evaluation equipment has been obtained to meet the needs of the visually impaired and ESL consumers.

Program Expansion/Modification: The use of a mobile vocational evaluation unit is being assessed. Coordination of a pre-vocational program for CMI/CSE consumers is also being evaluated by VR, SWIFT and Mental Health staff.

Utilization Patterns: Although there has been improvement with regards to VR counselors providing adequate referral information there exists a need to continue improvement related to completion of referral forms, pertinent referral questions, adequate medical information, etc. There also exists a need to increase VR referrals for work adjustment services.

I. Operational Analysis (Needs identified) - continued

Program Accommodations: There is a need for joint VR/SWIFT staff training and program review on a quarterly basis. SWIFT has recently completed a successful CARF review and has emphasized training for job coaches geared towards future certification requirements.

II. Priority Result Areas (Expectations, outcomes, etc.)

Continuing improvement of CMI/CSE services including initiation of a pre-vocational program.

Increasing VR referrals to work adjustment and placement and follow-along.

Increase CBWE/CBWA site development.

Development of a consumer satisfaction and post-discharge survey.

Utilize mobile vocational evaluation unit to serve clients in rural areas currently unserved by a Community Rehabilitation Program.

Expand vocational evaluation services to assess visually impaired and ESL consumers.

Improve content and quality of referral information provided to SWIFT by VR counselors.

Initiate VR/SWIFT/Mental Health joint staff training and program review.

III. Performance Indicators and Objectives (Measurable results expected)

Develop pre-vocational program for CMI/CSE consumers by 6/30/93.

Increase VR referrals to work adjustment by 8.

Increase VR referrals to non-JTPA placement by 5.

Increase CBWE sites by 6/30/93.

Increase CBWA sites by 6/30/93.

Development of a consumer satisfaction and post-discharge survey by 3/31/93.

Complete 10 mobile vocational evaluations during FY 93.

IV. Action Plan (Activities)

Quarterly VR/SWIFT staffings.

IV. Action Plan (Activities) - continued

Monthly VR, SWIFT and Mental Health CMI/CSE meetings and participation in state CMI conference.

Group training sessions with VR/SWIFT to discuss issues such as PASS plans, IRWE's, natural supports, etc.

V. Community Strengths & Resources (Supports)

Continued cooperation and communication with community groups and agencies.

Region V
OPERATIONAL PLAN

1993

IDVR Office: Pocatello
Facility: Easter Seals/Goodwill Industries
Planners: Bruce Small and Sheila Lemmon

I. Operational Analysis (Needs identified)

Rehabilitation Outcomes: Overall rehabilitation outcomes have been very good. The PWI program has enhanced wages, benefits and allowed for a greater variety of occupational choices for clients. Increasing non-PWI placements will be a priority.

Services/Availability: The availability of in-house evaluations for clients in Region V needs to be improved. Community based work evaluation sites need to be developed as well.

Program Expansion/Modification: Although there exists a need to Easter Seal services in the southern counties, an assessment is necessary to determine the cost effectiveness of outreach rehabilitation services. A program modification developing a Business Advisory Council for Easter Seal vocational services is being considered.

Utilization Patterns: There is a need to increase utilization of CBWA and placement. Increasing referrals to the PWI program will also be emphasized.

Program Accommodations: A need for ongoing joint VR/Easter Seal staff training and quarterly planning sessions for entire staffs.

Partnerships: There exists a positive ongoing relationship between IDVR and Easter Seal staff.

Efficiency: There exists a need to focus on the length of time from referral to actual job placement. Development of CBWA sites and utilization of CBWE would increase efficiency and improve final outcomes.

Consumer Focus/Interpersonal Skills: Programs are flexible, clients are very involved in planning and services are tailored to individual needs. There is a need to address personal and vocational adjustment issues prior to the initiation of CBWA and placement services to ensure long term success.

II. Priority Result Areas (Expectations, outcomes, etc.)

Increase the number of successful placements, both PWI and non-PWI.

Assess the need and cost effectiveness of outreach services in the southern counties.

Development of a (BAC) Business Advisory Council for all Easter Seal programs to increase employer involvement.

Increase use of CBWA and develop CBWE sites.

Increase utilization of personal/vocational adjustment services prior to CBWA.

Modify the in-house vocational evaluation system to increase availability for Region V clients.

Increase VR referrals to PWI program.

Increase VR/Easter Seal joint staff training.

III. Performance Indicators and Objectives (Measurable results expected)

Increase community based work adjustment and placement by 10%.

Determine the feasibility of Easter Seal services in the southern counties by 6/30/93.

Development of the Business Advisory Council by 5/31/93.

Development of CBWE sites based on individual client needs.

Increase Region V in-house vocational evaluation by 5%.

Increase PWI referrals to 45 for FY 93.

IV. Action Plan (Activities)

Schedule meeting with VR and Easter Seal staff to assess "feasibility" for services in the southern counties.

Quarterly meetings with joint staffs to exchange ideas, information and to improve or enhance service delivery systems.

Group training sessions with both VR and Easter Seal staffs.

V. Community Strengths & Resources (Supports)

Development of and close association with Business Advisory Council by both staffs to ensure employer input and generate new employment opportunities for clients.

Network with ISU continuing education satellite programs in Preston and Soda Springs to assist with the outreaching of rural areas.

Region V
OPERATIONAL PLAN

1993

IDVR Office: Pocatello

Facility: DAWN Enterprises

Planner(s): Terry Hawley, Sheila Jackson & Delyn Porter

I. Operational Analysis (Needs identified)

Rehabilitation Outcomes: Improving the number of competitive community based placements and community based work evaluations/adjustments.

Partnerships: New rehab staff at the facility will foster open communications.

Consumer Focus: Focus on client involvement with rehab process to ensure client satisfaction with goals and objectives.

Program Expansion/Modification: Facility in process of completing major remodel/new construction project.

Utilization Patterns: Will increase vocational evaluation utilization with new trained evaluator and testing facility.

Program Accommodations: Will train evaluator and rehab staff to better fulfill their respective positions.

Strategic Goals: Will evaluate facility participation for movement to community opportunities.

II. Priority Result Areas (Expectations, outcomes, etc.)

Increase community based placements.

Complete construction of building to house administrative, IL, rehab staff.

Increase the quality of vocational evaluations.

III. Performance Indicators and Objectives (Measurable results expected)

Increase total number of community based placements (26's) to 21 this year.

Facility to expand vocational testing and secure qualified evaluator.

Increase referrals to vocational evaluation by 10%, contingent on above accomplishment by facility.

Completion of new 10,000 square foot building by 11/30/92.

IV. Action Plan (Activities)

Send staff to available training, i.e., CMI. Sponsor evaluator for job specific skill building. Monthly meetings with VR, Dawn and Mental Health to improve CSE/CMI services.

Quarterly VR/Dawn meetings to review client status/services.

Review 4/30/93 progress of operational plan.

V. Community Strengths & Resources (Supports)

Will network through mutual involvement in Mayor's Committee, Social Services Luncheon, Chamber of Commerce and Job Developers Organization.

Will coordinate with State Hospital South and Mental Health to assist in transitioning patients from in-patient to out-patient services utilizing the IL and vocational programs.

Will coordinate with the Bingham County School Districts for transitioning of students from school to adult sponsored services.

Region VI

OPERATIONAL PLAN

1993

IDVR Office: Idaho Falls

Facility: Development Workshop, Inc.

Planners: Tom Hally/Mike O'Bleness/Corey Barnard

I. Operational Analysis (Needs identified)

Services/Availability: Community Rehabilitation Program utilization at UVI in Rexburg and SRI in Salmon experienced growth. The PWI program was extended to provide more technical assistance to clients in other programs.

Program Expansion/Modification: VR opened an office in Rexburg and 62 referrals were taken from this area which resulted in more clients being served at UVI.

Utilization Patterns: We feel there is continued room for more utilization at UVI. Community based usage dominates services at DWI with an overall utilization pattern increasing, but facility based work adjustment decreasing. Fewer contracts at DWI could have contributed to this pattern. Utilization of the PWI program increased as well as the CSE/CMJ program. Would like to maintain strong client involvement with SRI.

Program Accommodations: Enhancement of the PWI program to provide technical assistance to other facility programs. The need to develop even closer communication among staff members is needed via peer worker team meetings.

Strategic Goals: Meetings to identify problems, strengths and solutions. One on one approach to be utilized more frequently.

1. More referral information from IDVR.
2. Better reports and billing from DWI.

II. Priority Result Areas (Expectations, outcomes, etc.)

Maintain high utilization in Salmon Region after successful outreach effort.

PWI improved this past year. Would like to achieve four more placements this next year. Slow down at the INEL will make this difficult. Technical assistance and a grant via IDVR State

II. Priority Result Areas (Expectations, outcomes, etc.) - continued

Office helped this past year. Will look to diversify the placements into job settings other than INEL.

Greater utilization of CMI/CSE strategy to include more clients with SLD.

Increased efficiency by clarifying mutual expectations with clients, facility and IDVR staff.

Continue to focus on enhancement of services to the hearing impaired.

III. Performance Indicators and Objectives (Measurable results expected)

Maintain community based activities at the increased level at SRI and 10% increase at UVI.

Referrals at IDVR Rexburg office were 62. IDVR would like to increase partnership with UVI to reach a referral outcome of 70.

Placement outcomes increased this past fiscal year. Would like to achieve five placements. Training in signing now available through community education. Staff from DWI and IDVR to take class.

Increase efficiency rate to 83% from 75% in evaluation attendance.

Increase utilization of DWI service in Idaho Falls area by 10 clients served.

IV. Action Plan (Activities)

Assignment of team of four (two VR and two DWI) has been established. Enhancement of this tool to share information should lead to improved outcomes.

PWI outreach to broader base of employers to utilize PWI resources throughout the nine county region.

To identify clients who are hearing impaired to serve on the DWI board of directors.

IDVR & DWI will increase client buy-in of evaluation via joint effort by IDVR and DWI staff.

This past year, facility utilization increase at UVI. Joint effort to increase referrals will be made with a goal to reach 70 referrals.

V. Community Strengths & Resources (Supports)

Joint partnerships with the following:

1. School Districts
2. Mental Health
3. Health & Welfare
4. Advisory Boards
5. Community Organizations
6. Localized training of staff
7. EITC as a partner
8. JOBS
9. Substance Abuse Resources
10. Job Service
11. Private Industry Council

Region VI
OPERATIONAL PLAN

1993

IDVR Office: Idaho Falls
Facility: Easter Seal/Goodwill Industries
Planner(s): Tom Hally/Sheila Lemmon

I. Operational Analysis (Needs identified)

Services/Availability: Evaluations and community based programs are available through the facility. PWI training available in Pocatello. There is an under-utilization of job coaching/CSE.

Program Expansion/Modification: Facility now has ability to provide services under the Health & Welfare contract for long term support. Special emphasis to become involved with the facility via CSE strategy. Will evaluate, via staff training, the need for utilization of work adjustment more frequently prior to community based activities.

Utilization Patterns: Staff vacancies at the facility lowered utilization of all programs during the last quarter. Training meetings have been developed to familiarize the new staff. The expectation is to return to former utilization patterns.

Program Accommodations: Important to re-establish communication with new staff. Two meetings have already been planned. Facility director and IDVR manager are meeting quarterly with CSE regional team. We expect increased utilization in this area now that a job coach has been hired.

II. Priority Result Areas (Expectations, outcomes, etc.)

Continue to be involved with joint activities. IDVR will interview facility staff and facility director will interview IDVR staff. First session has been planned.

Will attempt with new staff to foster ongoing communication with each other. Expect increase in placements to be the end result. Look for more utilization of job coaching, placement and follow along and up front work adjustment to contribute to more positive outcomes.

III. Performance Indicators and Objectives (Measurable results expected)

Cross training of new staff to establish closer relationships, quarterly CSE meetings and performance feedback are expected to lead to:

1. 30% increase in job coaching via successful outcomes.
2. Increase utilization of placement and follow along by 20% as per successful outcome.
3. Increase in work adjustment by 20% as measured by dollar amount.

VI. Action Plan (Activities)

Involvement with the facility has come to a standstill as vacancies at the facility existed for a significant period of time. Concentrated effort will be made to hold joint sessions to rebuild relationships between the staff. This will be a priority. Will solicit input from field staff to seek improvement.

V. Community Strengths & Resources (Supports)

1. Funding will remain near the same level.
2. Utilization of JTPA resources.
3. JOBS Program to provide day care.
4. Time allocation to provide evaluation & feedback to both staffs.
5. Continue to link with the GOALS Program to benefit transitioning students.

Region VII

OPERATIONAL PLAN

1993

IDVR Office: Caldwell
Facility: Easter Seal/Goodwill Industries
Planners: Dave Hawkes

I. Operational Analysis (Needs identified)

Rehabilitation Outcomes: Concerns remain regarding documentation for recommended services for both adjustment and placement and follow along. It should be noted, however, that the facility staff have made a concerted effort to communicate with IDVR prior to submitting additional recommendations for services. While this category does not represent a bona fide area of need, it is appropriate to document this issue in order to advise the facility of the potential for concern in the future.

Program Expansion/Modification: More emphasis needs to be focused in the development of community based training sites. This continues to be an ongoing concern expressed by IDVR staff.

Program Accommodations: Job coaches and program managers would benefit from more training regarding the ramifications of various disability restrictions.

Services/Availability: There is a need for Easter Seal to stabilize its staff turnover to ensure that two full staff members are able to work consistently in the Region VII area. This will enable Easter Seal to provide a full array of services which are necessary in order to justify an initial referral and the subsequent recommendations made by that referral.

II. Priority Result Areas (Expectations, outcomes, etc.)

1. Services Availability: Staff stability will be a major focus during FY 93 for Easter Seal.
2. Program Expansion/Modification: More emphasis should be focused on the development of community based training sites.
3. Program Accommodations: Program managers and job coaches should receive more training regarding the ramifications of various disability restrictions.

III. Performance Indicators and Objectives (Measurable results expected)

A facility evaluator will be hired and two staff members located in the Nampa/Caldwell vicinity.

Easter Seal staff in Region VII will increase community based placements to a level commensurate with the goals of the initial evaluation as well as IDVR/facility staffing recommendations.

The desired outcome will be better understanding of medical implications as well as more confidence on the part of the facility professional in his/her interaction with the client.

IV. Action Plan (Activities)

Again, the plan will focus on the addition of a full time facility evaluator and one additional staff member for the Nampa/Caldwell vicinity. This should be done no later than 10/30/92 in order to ensure successful provision of facility services to Region VII.

The performance track record for FY 93 will indicate 75% or better achievement of staffing goals.

The targeted facility staff should be invited to attend specific IDVR training seminars related to vocational implications of severe disabilities.

V. Community Strengths and Resources (Supports)

The facility will be responsible for providing the necessary resources to accomplish this objective.

The addition of a second staff member at the Nampa/Caldwell facility will ensure the successful outcome desired.

IDVR will constitute a major resource for facility personnel training enhancement. The facility should also provide pertinent training whenever the opportunity arises within the community.

Region VII
OPERATIONAL PLAN

1993

IDVR Office: Caldwell
Facility: Western Idaho Training Company, Inc.
Planner(s): Dave Hawkes

I. Operational Analysis (Needs identified)

Partnerships: A consensus among the staff has indicated approval of all service segments of the facility with the exception of the evaluation unit. It is felt that training and a possible addition of staff in that unit would ensure that appropriate services are offered to the widest array of disabilities groups.

Services/Availability: Again, the emphasis during 1993 will be on the acquisition of more CBWE sites as well as CBWA services.

Program Expansion/Modification: PWI Projects and enclaves would provide a variety of job options currently unavailable to clientele.

Program Accommodations: Continued focus upon Spanish-speaking clientele will be emphasized. Additionally, job coaches and program managers would benefit from more training in regard to the ramifications of various disability restrictions.

II. Priority Result Areas (Expectations, outcomes, etc.)

1. Partnerships: Additional training and possible addition to the evaluation staff would ensure that appropriate services are offered to the widest array of disability groups.
2. Services/Availability: More options for CBWE sites need to be made available to potential clients. CBWA services need to be increased as well.
3. Program Expansion/Modification: PWI projects and enclaves would provide a variety of job options currently unavailable to clientele.
4. Program Accommodations: Job coaches and program managers need more training in the ramifications of various disability restrictions.

III. Performance Indicators and Objectives (Measurable results expected)

1. The provision of additional training as well as the addition of another staff member could enhance the evaluation unit's capacity to accommodate a wider range of disability groups. Currently the evaluator is performing exceptionally well with one particular population only - developmentally disabled.
2. A measurable effort will be undertaken during FY 93 to enhance client vocational options within the community. CBWE/CBWA strategies will be increased significantly to address the recommendations outlined on the initial evaluation summaries.
3. An additional work adjustment, community based enclave could accommodate the needs of 15-20 additional client referrals annually. A PWI project could provide significant upgrading of earning potential for many of our clientele.
4. It is evident that the quality of job coaching services would be enhanced dramatically if facility staff were trained in regard to the complexities and characteristics of the wide array of disabled population referred to them by this agency for vocational services.

IV. Action Plan (Activities)

1. The facility will remain primarily responsible for provision of training opportunities. In addition, IDVR will offer the evaluation unit the opportunity to attend various medical/disability training programs that become available during FY 93.
2. IDVR staff assessment at the completion of FY 93 will reflect significant improvement in this category.
3. WITCO will be challenged to explore PWI opportunities through grant proposals. The acquisition of an additional enclave should be a priority for facility administration during FY 93.
4. Training should be provided during FY 93 whenever an opportunity arises. In-house training services would be the most likely source of assistance for these critical staff members.

V. Community Strengths & Resources (Supports)

1. The facility will remain primarily responsible for provision of training opportunities. In addition, IDVR will offer the evaluation unit the opportunity to attend various

V. Community Strengths & Resources (Supports) - continued

medical/disability training programs that become available during FY 93.

2. A well trained and disciplined placement and job coaching staff will ensure success in this category. IDVR fund allocated for site development will be available to meet the objectives desired.
3. WITCO is encouraged to confer with IDVR facility supervisor as well as grant procurement specialist in an effort to successfully meet the objectives outlined in this category.
4. In addition to facility sponsored training, it is probable that IDVR training could be made available to these staff at no cost to the facility. WITCO is encouraged to explore training opportunities which occur throughout the year in Boise and vicinity for IDVR personnel. In addition, the Industrial Commission as well as the Commission for the Blind provide training opportunities annually. These opportunities should be exploited when available.

IDAHO DIVISION OF VOCATIONAL REHABILITATION

FISCAL YEAR 1993 GOALS

The Idaho Division of Vocational Rehabilitation continues to support and be committed to the Community Rehabilitation Program partnerships via the following:

1. Development of new programs, contracts, and opportunities for service improvement or expansion thereby enhancing client goals and capabilities;
2. Improvement and expansion of traditional and, particularly, community-based programs;
3. Ongoing monitoring, program evaluation, and review;
4. Assurance of compliance with Section 504;
5. Quality services through a recognized accreditation;
6. Utilization of support training and alternative programs such as JTPA and PWIs;
7. Involvement of facility staff in the In-Service and other appropriate training activities;
8. Development and implementation of Affirmative Action Plans;
9. Meaningful holistic rehabilitation responsibly coordinated by the VR Counselor (case manager) with vested participation on the part of the client, facility service provider, and significant others directed at achieving the best possible outcome;
10. The Division will continue to maintain a pro-active stance in regard to research, development, innovation, and work creative projects that will successfully enhance independence and occupational opportunities for Idaho citizens experiencing disabilities and the resultant handicap to employment;
11. And, finally, the Division's commitment to traditional Community Rehabilitation Programs is first and foremost; therefore, certification of new vendors will not be accomplished unless a specific need is identified for which traditional Community Rehabilitation Programs are unable to respond in a expeditious manner, or they choose not to.

ICB INTRODUCTION
ASSESSMENT\PLANNING OF FACILITY SERVICES

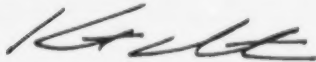
We want to thank all those who provided input and participation into the ICB assessment portion of this facility plan. Any comments you may have concerning the assessment and planning process for ICB is most welcome.

In this assessment and planning process we have coordinated with IDVR, we have utilized feedback from each of our regional Counselors as well as many of the facilities responding to our survey in order to assess and plan for regional needs as well as to develop statewide goals and priorities.

Assessment and planning are probably the most important and useful components of the facility plan. It helps agencies and facilities to design changes and improvements into services for the future. Because it is so important, we strive to be accurate and meaningful in our endeavors.

We would appreciate comments and suggestions about the survey questions of regional offices and of facilities. Are there different or additional kinds of information that you would like to see requested and reported? Additional types of facilities? Would you suggest different formats for reporting information? Are there additional assessment items specific to the ICB that you would like to see addressed? Would you like to be more involved in the ICB planning process? We'd like your opinion, so please take a minute to call or write.

Sincerely,



Kent Ireton
Independent Living Program Supervisor
And Facility Specialist
Idaho Commission for the Blind

Idaho Commission for the Blind
Regional Rehabilitation Facilities Priorities - State FY 1992

ICB Counselor Name: Sherry Adkins
Regional Office: Coeur d'Alene

1. Is there a need for expanded or improved rehabilitation facilities services in your region? If so, please address what is needed and why.

Looks great the way it's going!

2. List any specific rehabilitation or support services, that are not provided or not provided fully, that you believe need to be provided in your region.

Better transportation options.

3. Do you refer clients to facilities outside your region? Please list faciliti(es) and services.

Sundown Alcohol Center in Yakima, Washington.

4. Would you recommend any specific technical assistance; i.e. training, cash grants, equipment, to assist any of your local facilities in improving services.

Northern Idaho College, training on adaptive equipment for the blind.

5. Please list in order the most important services that you as a Counselor utilize from rehabilitation facilities:

- (1) Vocational Evaluation
- (2) Vocational Adjustment Training
- (3) Placement Services

Idaho Commission for the Blind
Regional Rehabilitation Facilities Priorities - State FY 1992

ICB Counselor Name: Gary D. Pickrel
Regional Office: Lewiston

1. Is there a need for expanded or improved rehabilitation facilities services in your region? If so, please address what is needed and why.

N/A

2. List any specific rehabilitation or support services, that are not provided or not provided fully, that you believe need to be provided in your region.

Transportation, reading programs for newspaper access, support groups. U of I and Lewis and Clark State College could use more access equipment such as speech and large print adapted computers, optical scanners and readers.

3. Do you refer clients to facilities outside your region? Please list faciliti(es) and services.

Yes, diabetic education clinics, Deaconess Medical in Spokane, Washington.

4. Would you recommend any specific technical assistance; i.e. training, cash grants, equipment, to assist any of your local facilities in improving services.

Yes, Opportunities Unlimited could use a closed circuit television enlarger, various computer adaptations (speech, large print), talking calculators.

Also, would like to see a grant to establish a newspaper reading program.

5. Please list in order the most important services that you as a Counselor utilize from rehabilitation facilities:

- (1) Job Placement
- (2) Vocational Evaluation
- (3) On the Job Training
- (4) Job Training Partnership Act

Idaho Commission for the Blind
Regional Rehabilitation Facilities Priorities - State FY 1992

ICB Counselor Name: Matt Osinski
Regional Office: Boise

1. Is there a need for expanded or improved rehabilitation facilities services in your region? If so, please address what is needed and why.

No

2. List any specific rehabilitation or support services, that are not provided or not provided fully, that you believe need to be provided in your region.

None.

3. Do you refer clients to facilities outside your region? Please list faciliti(es) and services.

Yes, Lighthouse for the Blind, Seattle, Washington.

4. Would you recommend any specific technical assistance; i.e. training, cash grants, equipment, to assist any of your local facilities in improving services.

No.

5. Please list in order the five most important services that you as a Counselor utilize from rehabilitation facilities:

(1) Vocational Evaluation

Idaho Commission for the Blind
Regional Rehabilitation Facilities Priorities - State FY 1992

ICB Counselor Name: Kevin Nathan

Regional Office: ICB Orientation Center Counselor

1. Is there a need for expanded or improved rehabilitation facilities services in your region? If so, please address what is needed and why.

The biggest need in the Orientation Center is for more tools for accurate vocational assessment.

2. List any specific rehabilitation or support services, that are not provided or not provided fully, that you believe need to be provided in your region.

Better transportation options.

3. Do you refer clients to facilities outside your region? Please list faciliti(es) and services.

Helen Keller National Center, New York, NY.

4. Would you recommend any specific technical assistance; i.e. training, cash grants, equipment, to assist any of your local facilities in improving services.

Yes, especially training and highly controlled cash grants for purchase of adaptive technology and/or specialized assessment instruments.

5. Please list in order the five most important services that you as a Counselor utilize from rehabilitation facilities:

- (1) Vocational Evaluations
- (2) Work Adjustment

Idaho Commission for the Blind
Regional Rehabilitation Facilities Priorities - State FY 1992

ICB Counselor Name: Dana Ard
Regional Office: Treasure Valley

1. Is there a need for expanded or improved rehabilitation facilities services in your region? If so, please address what is needed and why.

More training on high tech adaptive equipment utilized by the blind. More capability for evaluating clients who will be using high tech equipment.

2. List any specific rehabilitation or support services, that are not provided or not provided fully, that you believe need to be provided in your region.

Thorough work evaluations including aptitude and interest testing considering the above statement.

3. Do you refer clients to facilities outside your region? Please list faciliti(es) and services.

Helen Keller Nation Center, New York, NY, for evaluation and personal adjustment training.

Lighthouse for the Blind, Seattle, WA, for vocational evaluation.

4. Would you recommend any specific technical assistance; i.e. training, cash grants, equipment, to assist any of your local facilities in improving services.

Yes.

5. Please list in order the five most important services that you as a Counselor utilize from rehabilitation facilities:

- (1) Work Evaluation
- (2) Community Supported Employment
- (3) Extended Sheltered Employment
- (4) Placement
- (5) Job Referrals

Not Reporting

ICB Region IV - Twin Falls

ICB Region V - Pocatello

IDAHO COMMISSION FOR THE BLIND
FISCAL YEAR 1993 GOALS

1. Facility Development - Following the award of an establishment grant, the Commission for the Blind will work with a Treasure Valley facility to develop capacity and train staff in specialized evaluation services for the blind and visually impaired.

The Idaho Commission for the Blind will support facility efforts in developing or improving services that lead to competitive employment for the blind including; vocational evaluation, work adjustment and job coaching services.

2. Job Placement Emphasis - Job placement is the primary focus of the Idaho Commission for the Blind and will be conducted primarily through existing ICB staff. ICB will purchase other services from facilities such as evaluation and job coaching services which support the job placement emphasis and services provided by the ICB.

3. Technical Assistance / Information Sharing - In the past poor communication and training has caused problems between facilities and ICB. In an effort to improve communication and expertise in blindness issues, the Idaho Commission for the Blind will:

- A. Provide technical assistance upon request to those facilities indicating a need for assistance in providing services for the blind.
- B. Encourage sharing of training, in and effort to better facilitate an exchange of information and ideas as to how rehabilitation facilities can best be utilized persons who are blind or visually impaired.
- C. Idaho Commission for the Blind administration will encourage regional Counselors to maintain close working relationships with the rehabilitation facilities in their area, conducting on-site visits, discussing local needs and encouraging improvement of services for the blind and visually impaired.

4. Supported Employment The agency hopes to expand our supported employment program this fiscal year and utilize rehabilitation facilities for Job Coaching and Placement services.

5. Orientation Center - testing capacity The Idaho Commission for the Blind will develop basic personality and interest inventory testing capacity with the Orientation and Adjustment Center in Boise.
6. Accessible Facilities - The ICB intends to work only with facilities that provide accessibility for persons with disabilities as described in Section 504 of the Rehabilitation Act and in the Americans with Disabilities Act. Primarily, we are concerned about accessibility issues for the blind and visually impaired. This includes communications accessibility and the availability of alternative forms of communication, including large print, braille, voice recording or reader services.

IV.

THE FOLLOWING PAGES CONTAIN
COMMUNITY REHABILITATION PROGRAM INVENTORIES

Definitions of Community Rehabilitation Program
Certification Classifications

- a. Rehabilitation Center - an autonomous organization and a legally constituted entity, providing a range of services in the field of rehabilitation.
- b. Evaluation and Training - the primary objective of the program is to apply vocational service, including evaluation and training, and transitional or interim employment, which will enable the client to obtain competitive employment, or further education or training leading to employment. Should offer placement service.
- c. Rehabilitation Industry (workshop) - the primary objective of the program is to provide remunerative employment for an indefinite period of time to individuals who cannot meet the standards of the competitive labor market. Evaluation and training will be continuous to determine if these individuals can become competitively employed.
- d. Work Services - provide mainly therapeutic activities and some remunerative employment. Some work activities may be without remuneration; and client productivity is to be improved whereby they may become capable of community-based supported employment.
- e. Residential/Social Adjustment Center - an organized program of services designed to assist an individual to develop social or independent living skills. Best described as a group-living situation.
- f. Programmed Boarding - a Community Rehabilitation Program providing a place to stay for individuals requiring minimal supervision and who are typically employed or in training. May or may not provide board as well as room.

Definitions of Provided Services

- a. Medical Evaluation - services involving medical diagnostic procedures and consultative evaluation, under direction of a licensed physician.
- b. Medical Management - services involving the progressive treatment and supervision of client medical problems as related in all program areas while in residence or attendance at the facility, under direction of a licensed physician.
- c. Physical Therapy - area of physical restoration services rendered by physical therapists.
- d. Occupational Therapy - the application or use of any occupations for remedial purposes under the direction of occupational therapists.
- e. Speech and Hearing Services - services rendered by speech pathologists, audiologists, and related personnel.
- f. Psychological - services related to the mind and mental functioning, particularly as demonstrated in behavior, under direction of a psychologist.
- g. Social Service - services rendered by a social worker, family counselors, and similar personnel working in the field of social adaptation.
- h. Vocational Counseling - the process of vocational guidance, selection and follow-up, under direction of professional personnel trained in appropriate skills and techniques.
- i. Vocational Evaluation - services related to the determination of the adaptability of individuals to particular careers or lines of endeavor by behavioral observation through an organized process of job tryouts and sampling, either simulated or actual.
 - 1. Testing - administration and interpretation of interest, aptitude, and other similar tests, e.g., WAIS, WISC, Kuder, etc.
 - 2. Work Samples - administration and interpretation of "samples" of work taken from business and industry

and standardized to represent an indication of ability to do the type of work sampled.

3. Community Rehabilitation Program Tryouts - observation of clients placed on job stations within the Community Rehabilitation Program.
4. Community Tryouts - observation of clients placed on jobs in regular business and industry.
- j. Vocational Training - services rendered in connection with the fitting of a client for gainful employment. Such work normally is performed by vocational instructors, occupational skill instructors, industrial arts instructors, and similar types of teachers with specific curricula.
- k. Job Placement - services rendered in connection with providing jobs for clients, usually done by vocational counselors or placement specialists.
- l. Community Rehabilitation Program Employment
 1. Transitional - of a temporary duration where clients, after suitable work adjustment training and exposure, are expected to go on to the competitive field.
 2. Community Supported - employment of an enduring or permanent duration under circumstances where the client is in a competitive environment, although they must continue under supported and protected conditions, i.e., job coaching.
 3. Work Services - provision of work-oriented activities for handicapped workers whose physical or mental impairments are so severe as to make their capacities for employment non-competitive.
- m. Activities - provision of activities designed to be primarily therapeutic (and not necessarily vocationally related) for the severely disabled. Typical activities are making rugs, ceramics, and similar arts and crafts; recreational activities, independent living activities, etc.
- n. Group Living - a residential program designed to assist a person to develop social and living skills which will allow him eventually to live independently.

PANHANDLE SPECIAL NEEDS, INC.

1425 N. Boyer
Sandpoint, Idaho 83864
Telephone: 263-7022

ROGER L. STANTON, EXECUTIVE DIRECTOR

Fiscal Year: July 1 - June 30

Organizational
Form: Private/nonprofit

Principle
Products &
Service
Contracts: Miscellaneous cut-shop contracts, solder elec-
tronic parts, mailings, CSE, Placement, Transi-
tion, Evaluation, Work Adjustment, Work Servic-
es, Residential Services and Developmental
Services

Property: 19,000 sq. ft. (rented)

Percentage of
Total Revenue
Derived From
Production: 4%

Facility
Classification: Rehabilitation Center, Evaluation & Train-
ing, Rehabilitation Industry (Workshop), Work
Services, and Adult Development Center

Certifications/
Accreditations: Dept. of Labor: Work Services, General Work-
shop, Evaluation & Training, Special Certifi-
cate

CARE - Work Evaluation, Work Adjustment, Job
Placement, Work Services, and Supported Employ-
ment

Adult Developmental Center

Specialized Shelter Home

Semi-independent Living

**Sources &
Frequency of
Client
Referral:**

Idaho Div. of Vocational Rehabilitation	22
Department of Health and Welfare . . .	2
Physician/Therapist.	1
Client/Family.	3
Other public or private agencies . . .	15
1. School District	
2. Probation/Parole	
3. Private VR	
4. Friend	

**Caseload
Statistics:**

<u>42/day</u>	a. Present daily client capacity as of 6/30/92
<u>37</u>	b. Average daily non-VR client utilization (last 12 mo.)
<u>5/day</u>	c. Average daily IDVR/client utilization (last 12 mo.)
<u>88%</u>	d. Percent of capacity utilized by non-VR clients (b - a)
<u>12%</u>	e. Percent of capacity utilized by IDVR clients (c - a)
<u>100%</u>	f. Overall client utilization (b + c - a)
<u>20%</u>	g. Projected potential percentage of utilization by IDVR clients
<u>75</u>	h. Total number of clients served (SFY 1992)
<u>22</u>	i. Total number of clients referred by IDVR (SFY 1992)
<u>5</u>	j. Overall number of IDVR clients placed in work services employment
<u>19</u>	k. Overall number of IDVR clients placed in Community Supported Employment
<u>1</u>	l. Overall number of IDVR clients placed in direct competitive employment

DISABILITY GROUPS SERVED

<u>Category</u>	<u>Number of clients served</u>	
	<u>Primary disability</u>	<u>Secondary disability (if any)</u>
Mentally retarded: mild	27	0
Mentally retarded: moderate	6	0
Mental illness (psychoneurotic or other personality disorder)	13	0
Blind or other visual	1	0
Deaf/Hearing impaired	0	0
Orthopedic	3	0
Cerebrovascular accident/stroke	1	0
Cardiovascular (excluding CVA)	0	0
Epilepsy	0	0
Cerebral Palsy	1	0
Traumatic Brain Injury	3	0
Chemical Dependency (Alcohol/Drugs)	0	0
Learning Disability	10	0
Developmental Disability	6	0
*Other (e.g., <u>polio</u> , <u>quadriplegia</u> , etc.)	4	0
TOTALS	75	0

SERVICES PROVIDED

	<u>Provided by full or part time facility staff</u>	<u>Provided by consultants paid by the facility</u>	<u>Provided by others at no cost to the facility</u>	<u>Not Provided</u>
Medical Evaluation		X	X	
Medical Management	X	X	X	
Occupational Therapy			X	
Physical Therapy		X	X	
Speech/Hearing Services		X		
Psychological		X	X	
Social Services	X		X	
Vocational Counseling	X		X	
Vocational Evaluation				
1. Testing	X	X	X	
2. Work Samples	X		X	
3. Facility Work Eval.	X			
4. Community Work Eval.	X			
Vocational Training			X	
Placement (Competitive)	X		X	
Supported Employment	X			
Transitional Employment	X			
Work Services	X			
Activities	X		X	
Group Living	X		X	
OTHER				

TRANSITIONAL EMPLOYMENT SERVICES FOR THE HANDICAPPED (TESH)

3803 Industrial Park Avenue
Coeur d'Alene, Idaho 83814
Telephone: 765-5105
FAX: 765-3817

KENNETH A. KORCZYK, EXECUTIVE DIRECTOR

Branch

Operations: TESH/Shoshone
507 Cedar
Wallace, Idaho 83873
Telephone: 752-0451

Fiscal Year: July 1 - June 30

Organizational
Form: Private/nonprofit

Principle

Products &
Service

Contracts: Products: Ceramic Items. Services: Janitorial,
Bulk Mailing, Shrink Wrapping, Packaging and Assem-
bly. Woodworking discontinued June, 1992.

Property: 16,200 + 300 sq. ft. Group Home and four-plex
apartment building (owned); 1,000 sq. ft.
(rent/lease)

Percentage of
Total Revenue
Derived From
Production: 41%

Facility

Classification: Rehabilitation Center, Evaluation and Train-
ing, Rehabilitation Industry (Workshop), Work
Services, Residential/Social Adjustment Center, and
Programmed Boarding House (semi-independent apart-
ments)

Certifications/

Accreditations: Dept. of Labor - General Workshop

CARF - Vocational Evaluation, Work Adjustment, Job
Placement, Work Services, and Community Supported
Employment

**Caseload
Statistics:**

- 130/day a. Present daily client capacity as of 6/30/92
- 85 b. Average daily non-VR client utilization
(last 12 mo.)
- 20/day c. Average daily IDVR/client utilization
(last 12 mo.)
- 65% d. Percent of capacity utilized by non-VR
clients (b - a)
- 15% e. Percent of capacity utilized by IDVR clients
(c - a)
- 81% f. Overall client utilization (b + c - a)
- 35% g. Projected potential percentage of utilization
by IDVR clients
- 238 h. Total number of clients served (SFY 1992)
- 158 i. Total number of clients referred by IDVR
(SFY 1992)
- 4 j. Overall number of IDVR clients placed in work
services employment
- 14 k. Overall number of IDVR clients placed in
Community Supported Employment
- 15 l. Overall number of IDVR clients placed in
direct competitive employment

**Sources &
Frequency of
Client
Referral:**

Idaho Div. of Vocational Rehabilitation	158
Department of Health and Welfare . . .	56
Physicians/Therapists.	0
Client/Family.	6
Other public or private agencies . . .	18
1. IDFMR	
2. Private rehabilitation agencies	

DISABILITY GROUPS SERVED

<u>Category</u>	<u>Number of clients served</u>	
	<u>Primary disability</u>	<u>Secondary disability (if any)</u>
Mentally retarded: mild	54	6
Mentally retarded: moderate	36	3
Mental illness (psychoneurotic or other personality disorder)	37	18
Blind or other visual	3	3
Deaf/Hearing impaired	5	4
Orthopedic	35	12
Cerebrovascular accident/stroke	5	1
Cardiovascular (excluding CVA)	4	0
Epilepsy	3	12
Cerebral Palsy	1	2
Traumatic Brain Injury	4	0
Chemical Dependency (Alcohol/Drugs)	6	15
Learning Disability	18	5
*Other (e.g., <u>polio</u> , <u>quadriplegia</u> , etc.)	27	14
TOTALS	238	95

SERVICES PROVIDED

	Provided by full or part time facility staff	Provided by consultants paid by the facility	Provided by others at no cost to the facility	Not Provided
Medical Evaluation		X		
Medical Management				X
Occupational Therapy			X	
Physical Therapy			X	
Speech/Hearing Services			X	
Psychological	X	X		
Social Services	X			
Vocational Counseling	X			
Vocational Evaluation	X			
1. Testing	X			
2. Work Samples	X			
3. Facility work eval.	X			
4. Community work eval.	X			
Vocational Training	X			
Placement (Competitive)	X			
Supported Employment	X			
Transitional Employment	X			
Work Services	X			
Activities	X			
Group Living	X			
OTHER	X			
1. Semi-Independent Living				
2. Developmental Therapy				
3. Customized Training				

LEWISTON GOODWILL INDUSTRIES

East 201 Third Avenue
Spokane, Washington 99202-1491
Telephone: (509) 838-4246

BOBBI JOHNSON, CHIEF EXECUTIVE OFFICER

Branch
Operation

Fiscal Year: January 1 - December 31

Organizational
Form: Private/nonprofit

Principle
Products &
Service
Contracts: Cleaning, processing and sales of donated used
goods.

Property: 24,800 square feet (owned)

Percentage of
Total Revenue
Derived From
Production: 86%

Facility
Classification: Rehabilitation Center, Evaluation and Train-
ing, and Employers of Disadvantaged and Disabled
Employees

Certifications/
Accreditations: Dept. of Labor - General Workshop and Evaluation
and Training

IDVR - Interim Certification

Sources &
Frequency of
Client
Referral:

Idaho Div. of Vocational Rehabilitation	15
Department of Health and Welfare . . .	0
Physicians/Therapists.	0
Client/Family.	0
Other public or private agencies . . .	0

Caseload
Statistics:

- 8/day a. Present daily client capacity as of 6/30/92
- 0 b. Average daily non-VR client utilization
(last 12 mo.)
- 0 c. Average daily IDVR/client utilization
(last 12 mo.)
- 0 d. Percent of capacity utilized by non-VR
clients (b - a)
- 25% e. Percent of capacity utilized by IDVR clients
(c - a)
- 25% f. Overall client utilization (b + c - a)
- 75% g. Projected potential percentage of utilization
by IDVR clients
- 14 h. Total number of clients served (SFY 1992)
- 15 i. Total number of clients referred by IDVR
(SFY 1992)
- 0 j. Overall number of IDVR clients placed in work
services employment
- 1 k. Overall number of IDVR clients placed in
Community Supported Employment
- 2 l. Overall number of IDVR clients placed in
direct competitive employment

DISABILITY GROUPS SERVED

<u>Category</u>	<u>Number of clients served</u>	
	<u>Primary disability</u>	<u>Secondary disability (if any)</u>
Mentally retarded: mild	3	0
Mentally retarded: moderate	0	0
Mental illness (psychoneurotic or other personality disorder)	5	0
Blind or other visual	0	0
Deaf/Hearing impaired	0	1
Orthopedic	3	1
Cerebrovascular accident/stroke	0	0
Cardiovascular (excluding CVA)	0	1
Epilepsy	0	0
Cerebral Palsy	0	2
Traumatic Brain Injury	1	0
Chemical Dependency (Alcohol/Drugs)	1	0
Learning Disability	1	0
*Other (e.g., <u>polio</u> , <u>quadriplegia</u> , etc.)	0	0
TOTALS	14	5

SERVICES PROVIDED

	<u>Provided by full or part time facility staff</u>	<u>Provided by consultants paid by the facility</u>	<u>Provided by others at no cost to the facility</u>	<u>Not Provided</u>
Medical Evaluation				X
Medical Management				X
Occupational Therapy				X
Physical Therapy				X
Speech/Hearing Services				X
Psychological				X
Social Services				X
Vocational Counseling				X
Vocational Evaluation	X			
1. Testing	X			
2. Work Samples	X			
3. Facility work eval.	X			
4. Community work eval.	X			
Vocational Training	X			
Placement (Competitive)	X			
Supported Employment				X
Transitional Employment				X
Work Services				X
Activities				X
Group Living				X
OTHER				X

OPPORTUNITIES UNLIMITED, INC.

2705 East Main
Lewiston, Idaho 83501
Telephone: 743-1563

RONALD H. RUPPE, PRESIDENT/EXECUTIVE DIRECTOR

Branch Operation: 312 S. Washington
Moscow, Idaho 83843
Telephone: 883-5587

Fiscal Year: July 1 - June 30

Organizational
Form: Private/nonprofit

Principle
Products &
Service
Contracts: Grounds Maintenance, Janitorial, Packaging, and
Light Assembly

Property: 6,000 sq. ft. (rent/lease), 3,000 sq. ft.
(rent/lease)

Percentage of
Total Revenue
Derived From
Production: 25%

Facility
Classification: Rehabilitation Center, Evaluation & Training,
Rehabilitation Industry (workshop), Work Services

Certifications/
Accreditations: Dept. of Labor - Work Services, General Work-
shop, Evaluation & Training

CARE - Work Evaluation, Work Adjustment, Job
Placement, Work Services, and Supported Employ-
ment

IDVR

**Sources &
Frequency of
Client
Referral:**

Idaho Div. of Vocational Rehabilitation	151
Department of Health and Welfare . . .	64
Physicians/Therapists.	0
Client/Family.	0
Other public or private agencies . . .	69
1. Washington Division of Voc. Rehab.	
2. School Districts	
3. Insurance Company	
4. Stepping Stones	

**Caseload
Statistics:**

<u>130/day</u>	a. Present daily client capacity as of 6/30/92
<u>50</u>	b. Average daily non-VR client utilization (last 12 mo.)
<u>10/day</u>	c. Average daily IDVR/client utilization (last 12 mo.)
<u>46%</u>	d. Percent of capacity utilized by non-VR clients (b - a)
<u>8%</u>	e. Percent of capacity utilized by IDVR clients (c - a)
<u>54%</u>	f. Overall client utilization (b + c - a)
<u>15%</u>	g. Projected potential percentage of utilization by IDVR clients
<u>284</u>	h. Total number of clients served (SFY 1992)
<u>151</u>	i. Total number of clients referred by IDVR (SFY 1992)
<u>5</u>	j. Overall number of IDVR clients placed in work services employment
<u>14</u>	k. Overall number of IDVR clients placed in Community Supported Employment
<u>25</u>	l. Overall number of IDVR clients placed in direct competitive employment

DISABILITY GROUPS SERVED

<u>Category</u>	<u>Number of clients served</u>	
	<u>Primary</u> <u>disability</u>	<u>Secondary</u> <u>disability</u> <u>(if any)</u>
Mentally retarded: mild	66	0
Mentally retarded: moderate	0	0
Mental illness (psychoneurotic or other personality disorder)	41	0
Blind or other visual	7	0
Deaf/Hearing impaired	6	0
Orthopedic	81	0
Cerebrovascular accident/stroke	2	0
Cardiovascular (excluding CVA)	1	0
Epilepsy	3	0
Cerebral Palsy	3	0
Traumatic Brain Injury	13	0
Chemical Dependency (Alcohol/Drugs)	11	0
Learning Disability	32	0
*Other (e.g., <u>polio</u> , <u>quadriplegia</u> , etc.)	31	0
TOTALS	284	0

SERVICES PROVIDED

	Provided by full or part time facility staff	Provided by consultants paid by the facility	Provided by others at no cost to the facility	Not Provided
Medical Evaluation				X
Medical Management				X
Occupational Therapy				X
Physical Therapy				X
Speech/Hearing Services			X	
Psychological		X		
Social Services			X	
Vocational Counseling	X			
Vocational Evaluation	X			
1. Testing	X			
2. Work Samples	X			
3. Facility work eval.	X			
4. Community work eval.	X			
Vocational Training	X			
Placement (Competitive)	X			
Supported Employment	X			
Transitional Employment	X			
Work Services	X			
Activities	X			
Group Living	X			

ASSOCIATION FOR RETARDED CITIZENS OF ADA COUNTY

4402 Albion
Boise, Idaho 83705
Telephone: 343-5583
FAX: 343-5683

WILLIAM R. McGOWAN, EXECUTIVE DIRECTOR

Fiscal Year: January 1 - December 31

Organizational
Form: Private/nonprofit

Principle
Products &
Service
Contracts: Packaging, Bench Assembly, Pallets, Stakes and
Lathe, Collating, Bulk Mailing

Property: 31,250 sq. ft. (owned), 8,650 sq. ft. (rented/
leased)

Percentage of
Total Revenue
Derived From
Production:

Facility
Classification: Rehabilitation Center

Certifications/
Accreditations: Dept. of Labor - Work Services

CARE - Vocational Evaluation, Work Adjustment,
Job Placement, Work Services, Supported Employ-
ment, Industry-Based Programs, Personal & Social
Adjustment Services, Community Living Programs
Integrated.

DD Center Certification

Residential Care Licensure

Sources &
Frequency of
Client

Referral:	Idaho Div. of Vocational Rehabilitation	362
	Department of Health and Welfare . . .	112
	Physicians/Therapists.	0
	Client/Family.	0
	Other public or private agencies . . .	0

**Caseload
Statistics:**

- 105 a. Present daily client capacity as of 6/30/92
- 72 b. Average daily non-VR client utilization (last 12 mo.)
- 33 c. Average daily IDVR/client utilization (last 12 mo.)
- 69½ d. Percent of capacity utilized by non-VR clients
(b - a)
- 31½ e. Percent of capacity utilized by IDVR clients
(c - a)
- 100½ f. Overall client utilization (b + c - a)
- 16½ g. Projected potential percentage of utilization by IDVR clients
- 484 h. Total number of clients served (SFY 1992)
- 362 i. Total number of clients referred by IDVR (SFY 1992)
- 72 j. Overall number of IDVR clients placed in work services employment
- 50 k. Overall number of IDVR clients placed in Community Supported Employment
- 70 l. Overall number of IDVR clients placed in direct competitive employment

DISABILITY GROUPS SERVED

<u>Category</u>	<u>Number of clients served</u>	
	<u>Primary disability</u>	<u>Secondary disability (if any)</u>
Mentally retarded: mild	88	11
Mentally retarded: moderate	38	1
Mental illness (psychoneurotic or other personality disorder)	77	81
Blind or other visual	4	5
Deaf/Hearing impaired	8	14
Orthopedic	0	1
Cerebrovascular accident/stroke	0	1
Cardiovascular (excluding CVA)	1	0
Epilepsy	3	4
Cerebral Palsy	15	0
Traumatic Brain Injury	19	1
Chemical Dependency (Alcohol/Drugs)	21	21
Learning Disability	13	15
*Other (e.g., <u>polio</u> , <u>quadriplegia</u> , etc.)	202	70
TOTALS	484	225

SERVICES PROVIDED

	Provided by full or part time facility staff	Provided by consultants paid by the facility	Provided by others at no cost to the facility	Not provided
Medical Evaluation	X	X		
Medical Management	X	X		
Occupational Therapy		X		
Physical Therapy		X		
Speech/Hearing Services		X		
Psychological		X		
Social Services	X			
Vocational Counseling	X			
Vocational Evaluation	X			
1. Testing	X			
2. Work Samples	X			
3. Facility work eval.	X			
4. Community work eval.	X			
Vocational Training	X			
Placement (Competitive)	X			
Supported Employment	X			
Transitional Employment	X			
Work Services	X			
Activities	X			
Group Living	X			
OTHER	X			
1. <u>Independent Living</u>				
2. <u>Case Management</u>				

IDAHO EASTER SEAL SOCIETY/
GOODWILL INDUSTRIES OF SOUTHERN IDAHO

1350 Vista Avenue
Boise, Idaho 83705
Telephone: 384-1910
FAX: 384-5506

DONNA GRUMMER, EXECUTIVE DIRECTOR

Branch Office: Longbranch Station
16 - 12th Avenue South, #3
Nampa, ID 83651
Telephone: 467-1637

Fiscal Year: September 1 - August 31

Organisational
Form: Private/nonprofit

Property: 4,600 sq. ft. (rented/leased); 250 sq. ft. (Nampa
rented/leased)

Percentage of
Total Revenue
Derived From
Production: 0

Facility
Classification: Rehabilitation Center

Certification/
Accreditations: Special Certificate

CARF - Work Evaluation, Work Adjustment, Job
Placement, Occupational Skills Training, Communi-
ty Based Work Adjustment, Projects with Industry,
Supported Employment

Sources &
Frequency of
Client

Referral:

Idaho Div. of Vocational Rehabilitation	244
Department of Health and Welfare . . .	21
Physicians/Therapists	2
Client/Family	0
Other public or private agencies . . .	29
1. School	
2. Blind Commission	
3. Veterans Administration	
4. Worker's Compensation	
5. Attorney	
6. Private Industry Council	

**Caseload
Statistics:**

- 35 a. Present daily client capacity as of 6/30/92
- 3 b. Average daily non-VR client utilization (last 12 mo.)
- 20½ c. Average daily IDVR/client utilization (last 12 mo.)
- 9½ d. Percent of capacity utilized by non-VR clients
(b - a)
- 57½ e. Percent of capacity utilized by IDVR clients (c - a)
- 66½ f. Overall client utilization (b + c - a)
- 91½ g. Projected potential percentage of utilization by
IDVR clients
- 294 h. Total number of clients served (SFY 1992)
- 244 i. Total number of clients referred by IDVR (SFY 1992)
- 0 j. Overall number of IDVR clients placed in work
services employment
- 19 k. Overall number of IDVR clients placed in Community
Supported Employment
- 75 l. Overall number of IDVR clients placed in direct
competitive employment

DISABILITY GROUPS SERVED

<u>Category</u>	<u>Number of clients served</u>	
	<u>Primary disability</u>	<u>Secondary disability (if any)</u>
Mentally retarded	31	0
Mental illness (psychoneurotic or other personality disorder)	53	0
Blind or other visual	6	0
Deaf/Hearing impaired	18	0
Orthopedic	41	0
Cerebrovascular accident/stroke & Cardiovascular (excluding CVA)	6	0
Epilepsy	24	0
Cerebral Palsy	6	0
Traumatic Brain Injury	16	0
Chemical Dependency (Alcohol/Drugs)	27	0
Learning Disability	22	0
*Other (e.g., <u>polio</u> , <u>quadriplegia</u> , etc.)	65	0
TOTALS	300	0

SERVICES PROVIDED

	Provided by full or part time facility <u>staff</u>	Provided by consultants paid by the <u>facility</u>	Provided by others at no cost to the <u>facility</u>	<u>Not provided</u>
Medical Evaluation				X
Medical Management				X
Occupational Therapy				X
Physical Therapy				X
Speech/Hearing Services				X
Psychological				X
Social Services				X
Vocational Counseling	X			
Vocational Evaluation	X			
1. Testing	X			
2. Work Samples	X			
3. Facility work eval.	X			
4. Community work eval.	X			
Vocational Training	X			
Placement (Competitive)	X			
Supported Employment	X			
Transitional Employment	X			
Work Services				X
Activities				X
Group Living				X

MAGIC VALLEY REHABILITATION SERVICES, INC.

484 Eastland Drive South
Twin Falls, Idaho 83301
Telephone/TDD: 734-4112

JEFFERY C. CRUMRINE, EXECUTIVE DIRECTOR

Branch

Operation: Mini-Cassia Center
1247 West Main
Burley, ID 83318
678-9451

Fiscal Year: July 1 to June 30

**Organizational
Form:**

Private/nonprofit

Principle

**Products &
Service**

Contracts: Janitorial Services, Car Detailing Services,
Assembly Shop, Mailing and Collating, Full Ser-
vice Recycling

Property: Main Facility (11,000 sq. ft. owned) [Twin
Falls]; 3,000 (leased) [Burley]

**Percentage of
Total Revenue
Derived From**

Production: 23.3%

Facility

Classification: Rehabilitation Center

Certifications/

Accreditations: Dept. of Labor - General Workshop, Evaluation/
Training, and Special Certificate

CARE - Vocational Evaluation, Work Adjustment,
Job Placement, Work Services, Programs in Indus-
try, Supported Employment, and Personal/Social
Adjustment

**Sources &
Numbers of
Client
Referral:**

Idaho Div. of Vocational Rehabilitation	292
Department of Health and Welfare	68
Physician/Therapist	0
Client/Family	26
Other public or private agencies	62
1. Nevada Bureau of Voc. Rehabilitation	
2. Idaho Commission for the Blind	
3. Mental Health	
4. Private Rehabilitation	
5. Private Foundation	
6. Attorneys	
7. School	

**Caseload
Statistics:**

78/day a. Present daily client capacity as of 6/30/92
52.12 b. Average daily non-VR client utilization
 (last 12 mo.)
21.05/day c. Average daily IDVR/client utilization
 (last 12 mo.)
66.8% d. Percent of capacity utilized by non-VR clients
 (b - a)
26.9% e. Percent of capacity utilized by IDVR clients
 (c - a)
93.8% f. Overall client utilization (b + c - a)
29.5% g. Projected potential percentage of utilization by
 IDVR clients
448 h. Total number of clients served (SFY 1992)
292 i. Total number of clients referred by IDVR
 (SFY 1992)
8 j. Overall number of IDVR clients placed in work
 services employment
16 k. Overall number of IDVR clients placed in
 Community Supported Employment
46 l. Overall number of IDVR clients placed in direct
 competitive employment

* 10 directly placed by MVRs and 36 by program
 participant or referring agency as a result of MVRs
 services

DISABILITY GROUPS SERVED

<u>Category</u>	<u>Number of clients served</u>	
	<u>Primary disability</u>	<u>Secondary disability (if any)</u>
Mentally retarded	103	0
Mental illness (psychoneurotic or other personality disorder)	46	0
Blind or other visual	15	0
Deaf/Hearing impaired	1	0
Orthopedic	178	0
Cerebrovascular accident/stroke	0	0
Cardiovascular (excluding CVA)	3	0
Epilepsy	6	0
Cerebral Palsy	3	0
Traumatic Brain Injury	8	0
Chemical Dependency (Alcohol/Drugs)	8	0
Learning Disability	29	0
*Other (e.g., <u>polio</u> , <u>quadriplegia</u> , etc.)	48	0
TOTALS	448	0

SERVICES PROVIDED

	<u>Provided by full or part time facility staff</u>	<u>Provided by consultants paid by the facility</u>	<u>Provided by others at no cost to the facility</u>	<u>Not provided</u>
Medical Evaluation			X	
Medical Management			X	
Occupational Therapy			X	
Physical Therapy			X	
Speech/Hearing Services			X	
Psychological			X	
Social Services			X	
Vocational Counseling	X		X	
Vocational Evaluation	X			
1. Testing	X			
2. Work Samples	X			
3. Facility work eval.	X			
4. Community work eval.	X			
Vocational Training	X			
Placement (Competitive)	X			
Supported Employment	X			
Transitional Employment	X			
Work Services	X			
Activities	X			
Group Living			X	
Other	X			

1. Consultative Services relative to ADA compliance

DAWN ENTERPRISES, INC.

280 N. Cedar
P.O. Box 388
Blackfoot, Idaho 83221
Telephone: 785-5890
FAX: 785-3095

TERRY HAWLEY, EXECUTIVE DIRECTOR

Fiscal Year: July 1 to June 30

Organizational
Form: Private/nonprofit

Principle
Products &
Service
Contracts: Sewing, Custodial Services, Grounds Maintenance,
Small Assembly

Property: 24,000 sq. ft. (owned)

Percentage of
Total Revenue
Derived From
Production: 95%

Facility
Classification: Rehabilitation Center, Evaluation and Training,
Rehabilitation Industry (Workshop), Work Ser-
vices, Residential/Social Adjustment Center,
Independent Living, Adult Development Center,
Personal Care

Certifications/
Accreditations: Dept. of Labor - Work Services, General Work-
Workshop, Evaluation/Training, and Special Cer-
tificate

CARE - Vocational Evaluation, Work Adjustment
Training, Job Development/Placement, Work Servic-
es, Residential Services, Respite Programs and
Personal and Social Adjustment Services

IDVR

Health Care, Adult Development, Shelter Care,
Housing and Urban Development

**Sources &
Frequency of
Client**

Referral: Idaho Div. of Vocational Rehabilitation 123
 Department of Health and Welfare 97
 Physicians/Therapists 0
 Client/Family 4
 Other public or private agencies 48

**Caseload
Statistics:**

170 a. Present daily client capacity as of 6/30/92
78.86 b. Average daily non-VR client utilization (last 12 mo.)
.42 c. Average daily IDVR/client utilization (last 12 mo.)
91.14 d. Percent of capacity utilized by non-VR clients
 (b - a)
90.72 e. Percent of capacity utilized by IDVR clients
 (c - a)
.91 f. Overall client utilization (b + c - a)
30% g. Projected potential percentage of utilization by
 IDVR clients
70 h. Total number of clients served (SFY 1992)
123 i. Total number of clients referred by IDVR (SFY 1992)
44 j. Overall number of IDVR clients placed in work
 services employment
3 k. Overall number of IDVR clients placed in Community
 Supported Employment
4 l. Overall number of IDVR clients placed in direct
 competitive employment

DISABILITY GROUPS SERVED

<u>Category</u>	<u>Number of clients served</u>	
	<u>Primary disability</u>	<u>Secondary disability (if any)</u>
Mentally retarded: mild	34	3
Mentally retarded: moderate	17	3
Mental illness (psychoneurotic or other personality disorder)	94	2
Blind or other visual	1	2
Deaf/Hearing impaired	1	3
Orthopedic	22	3
Cerebrovascular accident/stroke	0	1
Cardiovascular (excluding CVA)	3	1
Epilepsy	5	6
Cerebral Palsy	3	1
Traumatic Brain Injury	3	1
Chemical Dependency (Alcohol/Drugs)	13	11
Learning Disability	14	7
*Other (e.g., <u>polio</u> , <u>quadriplegia</u> , etc.)	25	8
TOTALS	235	52

SERVICES PROVIDED

	Provided by full or part time facility staff	Provided by consultants paid by the facility	Provided by others at no cost to the facility	Not provided
Medical Evaluation			X	
Medical Management			X	
Occupational Therapy			X	
Physical Therapy			X	
Speech/Hearing Services			X	
Psychological			X	
Social Services	X			
Vocational Counseling	X			
Vocational Evaluation	X			
1. Testing	X			
2. Work Samples	X			
3. Facility work eval.	X			
4. Community work eval.	X			
Vocational Training	X			
Placement (Competitive)	X			
Supported Employment	X			
Transitional Employment	X			
Work Services	X			
Activities	X			
Group Living	X			
OTHER	X			

1. Independent Living Skills Assessment/Training
2. Personal Care Provider Umbrella/Service Provider
3. Residential Living Skills Training Center (Group Living Center)

SPECIAL WORKERS INDUSTRIES

1704 N. Main
Pocatello, Idaho 83204
Telephone: 232-7807

RICHARD D. KAUPP, EXECUTIVE DIRECTOR

Fiscal Year: July 1 to June 30

Organizational Form: Private/nonprofit

Principle Products & Service Contracts:

Property: 22,500 sq. ft. (owned)

Percentage of Total Revenue Derived From Production: 32%

Facility

Classification: Rehabilitation Center, Evaluation and Training, Rehabilitation Industry (workshop), Work Services

Certifications/

Accreditations: Dept. of Labor - Special Certificate

CARF - Vocational Evaluation, Work Adjustment, Job Placement, and Supported Employment

Sources &

Frequency of Client

Referral:

Idaho Div. of Vocational Rehabilitation	109
Department of Health and Welfare . . .	69
Physicians/Therapists.	0
Client/Family.	0
Other public or private agencies . . .	30
1. School District	
2. Private Day Evaluations	
3. Private Day Work Services	

**Caseload
Statistics:**

- 92 a. Present daily client capacity as of 6/30/92
- 62 b. Average daily non-VR client utilization (last 12 mo.)
- 17 c. Average daily IDVR/client utilization (last 12 mo.)
- 67 d. Percent of capacity utilized by non-VR clients (b - a)
- 18 e. Percent of capacity utilized by IDVR clients (c - a)
- 86 f. Overall client utilization (b + c - a)
- 254 g. Projected potential percentage of utilization by IDVR clients
- 208 h. Total number of clients served (SFY 1992)
- 109 i. Total number of clients referred by IDVR (SFY 1992)
- 1 j. Overall number of IDVR clients placed in work services employment
- 15 k. Overall number of IDVR clients placed in Community Supported Employment
- 22 l. Overall number of IDVR clients placed in direct competitive employment

DISABILITY GROUPS SERVED

<u>Category</u>	<u>Number of clients served</u>	
	<u>Primary disability</u>	<u>Secondary disability (if any)</u>
Mentally retarded: mild	48	9
Mentally retarded: moderate	30	3
Mental illness (psychoneurotic or other personality disorder)	48	24
Blind or other visual	1	2
Deaf/Hearing impaired	5	2
Orthopedic	33	16
Cerebrovascular accident/stroke	1	1
Cardiovascular (excluding CVA)	0	2
Epilepsy	3	3
Cerebral Palsy	4	4
Traumatic Brain Injury	8	0
Chemical Dependency (Alcohol/Drugs)	7	8
Learning Disability	18	15
*Other (e.g., <u>polio</u> , <u>quadriplegia</u> , etc.)	2	7
TOTALS	208	96

SERVICES PROVIDED

	Provided by full or part time facility staff	Provided by consultants paid by the facility	Provided by others at no cost to the facility	Not provided
Medical Evaluation			X	
Medical Management			X	
Occupational Therapy			X	
Physical Therapy			X	
Speech/Hearing Services			X	
Psychological			X	
Social Services			X	
Vocational Counseling	X		X	
Vocational Evaluation	X			
1. Testing	X			
2. Work Samples	X			
3. Facility work eval.	X			
4. Community work eval.	X			
Vocational Training	X			
Placement (Competitive)	X			
Supported Employment	X			
Transitional Employment	X			
Work Services	X			
Activities			X	
Group Living			X	
OTHER				X

DEVELOPMENT WORKSHOP, INC.

555 West 25th Street
Idaho Falls, Idaho 83402
Telephone: 524-1550
Fax: 523-3148

H. DWIGHT WHITTAKER, PRESIDENT/CEO

Fiscal Year: July 1 - June 30

**Organizational
Form:** Private/nonprofit

**Principle
Products &
Service**

Contracts: Wood Products, Injection Molded Products, Janitorial Services, Community Based Employment

Property: 54,500 sq. ft. (owned); 8,000 sq. ft. (rented/leased)

**Percentage of
Total Revenue
Derived From
Production:** 63%

Facility

Classification: Rehabilitation Center, Evaluation & Training

Certifications

Accreditations: Dept. of Labor - Work Services, General Workshop, Evaluation & Training

CARE - Vocational Evaluation, Work Adjustment, Occupational Skill Training, Job Placement, Work Services, Supported Employment, Industry Based Programs, Personal & Social Adjustment

**Sources &
Frequency of
Client**

Referral:	Idaho Div. of Vocational Rehabilitation	116
	Department of Health and Welfare . . .	5
	Physicians/Therapists.	0
	Client/Family.	12
	Other public or private agencies . . .	8

**Caseload
Statistics:**

- 260/day a. Present daily client capacity as of 6/30/92
155 b. Average daily non-VR client utilization (last 12 mo.)
45/day c. Average daily IDVR/client utilization (last 12 mo.)
60% d. Percent of capacity utilized by non-VR clients (b - a)
17% e. Percent of capacity utilized by IDVR clients (c - a)
77% f. Overall client utilization (b + c - a)
30% g. Projected potential percentage of utilization by IDVR clients
430 h. Total number of clients served (SFY 1992)
150 i. Total number of clients referred by IDVR (SFY 1992)
5 j. Overall number of IDVR clients placed in work services employment
30 k. Overall number of IDVR clients placed in Community Supported Employment
30 l. Overall number of IDVR clients placed in direct competitive employment

DISABILITY GROUPS SERVED

<u>Category</u>	<u>Number of clients served</u>	
	<u>Primary disability</u>	<u>Secondary disability (if any)</u>
Mentally retarded: mild	63	1
Mentally retarded: moderate	154	33
Mental illness (psychoneurotic or other personality disorder)	56	23
Blind or other visual	3	3
Deaf/Hearing impaired	8	17
Orthopedic	77	28
Cerebrovascular accident/stroke	5	3
Cardiovascular (excluding CVA)	4	8
Epilepsy	2	25
Cerebral Palsy	8	15
Traumatic Brain Injury	16	3
Chemical Dependency (Alcohol/Drugs)	8	7
Learning Disability	19	33
*Other (e.g., <u>polio</u> , <u>quadriplegia</u> , etc.)	7	52
TOTALS	430	251

SERVICES PROVIDED

	Provided by full or part time facility staff	Provided by consultants paid by the facility	Provided by others at no cost to the facility	Not provided
Medical Evaluation		X*		#
Medical Management				X*#
Occupational Therapy		X*		#
Physical Therapy		X*		#
Speech/Hearing Services		X*		#
Psychological		X*		#
Social Services		X*		#
Vocational Counseling	X*#			
Vocational Evaluation	X*#			
1. Testing	X*#			
2. Work Samples	X*#			
3. Facility work eval.	X*#			
4. Community work eval.	X*#			
Vocational Training	X*#			
Placement (Competitive)	X*#			
Supported Employment	X*#			
Transitional Employment	X*#			
Work Services	X*#			
Activities	X*			#
Group Living				X*#
OTHER				
1. Parent Support Group	*			
2. Client Support Group	X*#			

X = DWI (Development Workshop, Inc.)
 * = UVI (Upper Valley Industries)
 # = SRI (Salmon River Industries)

EASTER SEAL/GOODWILL INDUSTRIES

2110 Rollandet
Idaho Falls, Idaho 83402
Telephone: 529-5979
Fax: 529-5984

SHEILA LEMMON, CENTER DIRECTOR

Fiscal Year: July 1 - June 30

**Organizational
Form:** Private/nonprofit

**Principle
Products &
Service
Contracts:** Vocational Evaluation, Community Based Work
Adjustment, Placement & Follow Along, Projects
with Industry, Community Supported Employment

Property: Uncertain as to sq. ft. (owned, at no cost)

**Percentage of
Total Revenue
Derived From
Production:** 0%

**Facility
Classification:** Evaluation & Training

**Certifications/
Accreditations:** Dept. of Labor - Special Certificate

CARE - Vocational Evaluation, Work Adjustment,
Projects with Industry, Community Supported
Employment

Health & Welfare - Community Supported Employment

**Sources &
Frequency of
Client**

Referral:

Idaho Div. of Vocational Rehabilitation	302
Department of Health and Welfare . . .	4
Physicians/Therapists.	0
Client/Family.	0
Other public or private agencies . . .	46
1. Industrial Commission	
2. Private agencies	

**Caseload
Statistics:**

- 36 a. Present daily client capacity as of 6/30/92
- 4 b. Average daily non-VR client utilization (last 12 mo.)
- 25 c. Average daily IDVR/client utilization (last 12 mo.)
- 14 d. Percent of capacity utilized by non-VR clients
(b - a)
- 85 e. Percent of capacity utilized by IDVR clients (c - a)
- 80 f. Overall client utilization (b + c - a)
- 90 g. Projected potential percentage of utilization by IDVR clients
- 352 h. Total number of clients served (SFY 1992)
- 302 i. Total number of clients referred by IDVR (SFY 1992)
- 0 j. Overall number of IDVR clients placed in work services employment
- 2 k. Overall number of IDVR clients placed in Community Supported Employment
- 55 l. Overall number of IDVR clients placed in direct competitive employment

DISABILITY GROUPS SERVED

<u>Category</u>	<u>Number of clients served</u>	
	<u>Primary disability</u>	<u>Secondary disability (if any)</u>
Mentally retarded: mild	35	
Mental illness (psychoneurotic or other personality disorder)	36	
Blind or other visual	2	
Deaf/Hearing impaired	15	
Orthopedic	106	
Cerebrovascular accident/stroke	0	
Cardiovascular (excluding CVA)	3	
Epilepsy	5	
Cerebral Palsy	4	
Traumatic Brain Injury	28	
Chemical Dependency (Alcohol/Drugs)	21	
Learning Disability	97	
*Other (e.g., <u>polio</u> , <u>quadriplegia</u> , etc.)	0	
TOTALS	352	

SERVICES PROVIDED

	Provided by full or part time facility staff	Provided by consultants paid by the facility	Provided by others at no cost to the facility	Not provided
Medical Evaluation				X
Medical Management				X
Occupational Therapy				X
Physical Therapy				X
Speech/Hearing Services				X
Psychological				X
Social Services				X
Vocational Counseling	X			
Vocational Evaluation	X			
1. Testing	X			
2. Work Samples	X			
3. Facility work eval.	X			
4. Community work eval.	X			
Vocational Training	X			
Placement (Competitive)	X			
Supported Employment	X			
Transitional Employment	X			
Work Services				X
Activities				X
Group Living				X
OTHER				X

WESTERN IDAHO TRAINING COMPANY, INC.

3525 Arthur
Caldwell, Idaho 83605
Telephone: 454-3051
Fax: 454-3053

ROBERT N. JARBOE, PRESIDENT/CEO

Fiscal Year: July 1 - June 30

Organizational
Form: Private/nonprofit

Principle
Products &
Service

Contracts: Metal Salvage, Custodial, Collating, Popcorn
Products and Sales, Small Parts Assembly, Packag-
ing, Mailing, Sewing, Paper Shredding, Grounds
Training, Trophies, Plaques, Buttons, Engraving,
Motel Service

Property: 13,536 sq. ft. (owned)

Percentage of
Total Revenue
Derived From
Production: 46%

Facility

Classification: Rehabilitation Center, Evaluation & Training,
Rehabilitation Industry (workshop), Work Services,
Residential/Social Adjustment Center

Certifications

Accreditations: Dept. of Labor - Work Services, General Work-
shop, Evaluation & Training, and Special Certifi-
cate

CARF - Vocational Evaluation, Work Adjustment,
Job Placement, Work Services, Program in Indus-
try, Supported Employment

Sources &

Frequency of
Client

Referral: Idaho Div. of Vocational Rehabilitation 216
Department of Health and Welfare . . . 97
Physicians/Therapists. 38
Client/Family. 2
Other public or private agencies . . . 16
1. Oregon Vocational Rehabilitation
2. State Insurance Fund
3. Industrial Commission
4. Walker River Tribe

**Caseload
Statistics:**

- 220/day a. Present daily client capacity as of 6/30/92
135 b. Average daily non-VR client utilization (last 12 mo.)
21/day c. Average daily IDVR/client utilization (last 12 mo.)
61% d. Percent of capacity utilized by non-VR clients (b - a)
10% e. Percent of capacity utilized by IDVR clients (c - a)
71% f. Overall client utilization (b + c - a)
15% g. Projected potential percentage of utilization by IDVR clients
379 h. Total number of clients served (SFY 1992)
216 i. Total number of clients referred by IDVR (SFY 1992)
4 j. Overall number of IDVR clients placed in work services employment
23 k. Overall number of IDVR clients placed in Community Supported Employment
41 l. Overall number of IDVR clients placed in direct competitive employment

DISABILITY GROUPS SERVED

<u>Category</u>	<u>Number of clients served</u>	
	<u>Primary disability</u>	<u>Secondary disability (if any)</u>
Mentally retarded: mild	82	7
Mentally retarded: moderate	90	1
Mental illness (psychoneurotic or other personality disorder)	45	10
Blind or other visual	2	3
Deaf/Hearing impaired	2	0
Orthopedic	40	10
Cerebrovascular accident/stroke	2	0
Cardiovascular (excluding CVA)	2	2
Epilepsy	5	13
Cerebral Palsy	5	4
Traumatic Brain Injury	17	1
Chemical Dependency (Alcohol/Drugs)	14	12
Learning Disability	26	4
*Other (e.g., <u>polio</u> , <u>quadriplegia</u> , etc.)	37	35
TOTALS	369	102

SERVICES PROVIDED

	Provided by full or part time facility staff	Provided by consultants paid by the facility	Provided by others at no cost to the facility	Not provided
Medical Evaluation		X		
Medical Management				X
Occupational Therapy		X		
Physical Therapy		X		
Speech/Hearing Services		X		
Psychological		X		
Social Services		X		
Vocational Counseling	X			
Vocational Evaluation	X			
1. Testing	X			
2. Work Samples	X			
3. Facility work eval.	X			
4. Community work eval.	X			
Vocational Training	X			
Placement (Competitive)	X			
Supported Employment	X			
Transitional Employment	X			
Work Services	X			
Activities				X
Group Living				X
OTHER	X			
1. Transportation				
2. Developmental Program				

Addendum - Idaho Commission for the Blind Vendors

Anna Cammack

16027 E Rich
Spokane WA 99216
509-924-4236

Service Description: Independent living skills training, including peer counseling, orientation and mobility, braille, low vision aids, home management, daily living skills and community integration.

Certification: State of Idaho Contract, Independent Living Services, Idaho Commission for the Blind

Equal Quality Of Life (EQOL)

2519 Iowa
Caldwell ID 83605

Ph. 459-3208

Director: Candice Harris

Service Description: Independent living skills training, including peer counseling, orientation and mobility, braille, low vision aids, home management, daily living skills and community integration.

Certification: State of Idaho Contract, Independent Living Services, Idaho Commission for the Blind

Helen Keller National Center for Deaf-Blind Youth and Adults

111 Middle Neck Road
Sands Point, New York 11050

Ph. (516) 944-8900

Director: Joseph McNulty

Service Description: Vocational and Independent Living evaluation and training for those who are deaf-blind.

Certification: National Accreditation Council for Agencies Serving the Blind (NAC)

Lighthouse for the Blind

2501 S Plum
PO Box C-14119
Seattle WA 98114
Ph. 206-322-4200

Director: George Jacobsen

Service Description: A rehabilitation facility and sheltered workshop specializing in those who are blind, deaf-blind, and blind-developmentally disabled. Provide vocational and independent living services.

Certification: Regular Workshop Certificate
Evaluation or Training Program Certificate
Work Activities Center Certificate
Association for the Education and Rehabilitation of the Blind and Visually Impaired (AER)
NAC- For Agencies Serving the Visually Impaired

Lilac Foundation for the Blind

Lilac Blind Foundation
North 1212 Howard St
Spokane WA 99201

Ph. 509-328-9116

Directors: Nancy and Gene Damonico

Service Description: Providing vocational and independent living services for the blind, including braille, orientation and mobility, home management, daily living skills, and recreation skills, low vision services, adaptive technology services.

Certification: Washington Dept of Services for the Blind
Facility Certification - Vocational Rehabilitation and Independent Living.

Lions World Services for the Blind

2811 Fair Park Blvd.
Little Rock, AR 72204

Ph. 501-664-7100

Director: Jim Cordell

Services: Evaluation, Personal Adjustment Training, Prevocational Training, college prep course, various specialty occupation training including; taxpayer service representative, word processing and small engine repair. Residential rehabilitation program, independent living skills for seniors, low vision services.

Certification: National Accreditation Council for Agencies serving the blind (NAC).

Noel Newhouse

712 Jefferson #1
Sandpoint, ID 83864

Ph. 263-5075

Service Description: Independent living skills training, including peer counseling, orientation and mobility, braille, low vision aids, home management, daily living skills and community integration.

Certification: State of Idaho Contract, Independent Living Services, Idaho Commission for the Blind

Resources for the Blind (RBI)

36 N Latah
Boise ID 83706

Ph. 343-5066

Director: Laurence Smith

Service Description: Providing evaluation and work adjustment training, peer counseling, low vision and adaptive technology services, placement services, specializing in blindness and visual impairment.

Certification: State of Idaho Contract, Vocational Adjustment and Placement, Idaho Commission for the Blind

APPENDICES

GRANT INFORMATION

The Idaho Division of Vocational Rehabilitation is willing to accept grant applications and will review them when grant monies are available. Community Rehabilitation Programs should submit grant applications on IDVR Form R-45, which is included in this State Facility Plan along with the directions for completing it.

When the application is received by this office, a determination will be made as to denial or acceptance based on predetermined agency priorities. If grant monies are to be allocated, a contract indicating services to be provided by both parties will be written by the Idaho Division of Vocational Rehabilitation and signed by the grantor and grantee. Finally, a Notice of Grant Award will be issued to the grantee, and monies will be forthcoming.

In cases where equipment is being purchased, the grantee will submit to Idaho DVR a complete inventory list with serial numbers. A Progress and Financial Report is required six months after the Community Rehabilitation Program receives the equipment and also at the time of the termination of the grant.

Equipment will remain as the property of the State of Idaho for one year, or until the Idaho Division of Vocational Rehabilitation agrees to release or transfer ownership of such.

**STATE OF IDAHO, COMMISSION FOR THE BLIND
GRANT APPLICATION**

1. Project Title and Brief Description:

2. Type of Request (may be more than one)

☐ Staff	☐ Expansion	☐ Training
☐ Equipment	☐ Construction	☐ Other

3. Type of Application: ☐ New ☐ Renewal ☐ Supplement

4. Applicant Organization (include address and service area)

5. Type of Organization
Public Institution: ☐ State ☐ Local ☐ Other
Private Institution: ☐ Profit ☐ Not-For-Profit

6. Project Director (name, title, address, phone):

7. Name, Title, Address, Phone of Official Authorized to Sign for Applicant (if same as above, write same):

8. Organization Accredited: ☐ Yes ☐ No
(by whom, for what):

9. Dates of: a) Project Period _____
b) Budget Period _____

10. Signatures:
a) Person listed in item #7 _____ Date _____
b) Approved by ICB Administrator _____ Date _____

2.a. BUDGET

1. Personnel
(Include Fringe Benefits)
2. Equipment
3. Supplies
4. Travel
5. Training
6. Other
7. Totals

[illegible]

GUIDELINES FOR APPLICATION FOR ICB GRANT ASSISTANCE

1. COVER PAGE - Instructions

1. Title and Brief Description - Enter a title and brief description of the project.
2. Type of Request - self explanatory.
3. New application, renewal, or a supplement to a previous application? - self explanatory.
4. Facility name, address, and service area.
5. Organization type - self explanatory.
6. Project Director - List the individual who will be responsible for the project.
7. If same as Item #5, state same. If not, please indicate who the individual will be.
8. thru 10. - self-explanatory

2. BUDGET and BUDGET JUSTIFICATION

a. Budget

Under all categories, list the amount requested. If there is a match (money) required, list the amount of money required under match and enter total in the total column. If there is not a match required, enter the amount requested in the total column.

b. Budget Justification

1. Personnel - Include position descriptions and qualifications for the positions. List all fringe benefits to be provided and the amounts needed. Vacation allowance and sick leave are not considered among payable fringe benefits.
2. Equipment - Grant applications for equipment must include in the budget justification, a description of methods and assurances that the bidder will solicit competitive bids as possible to ensure quality and value for equipment and/or services to be purchased.
3. Supplies - consumable supplies necessary and related to the project.
4. Travel - Brief Description and detail of costs.
5. Training - Detail costs associated with training (other than personnel, supplies and travel).
6. Other - Detail and costs.

3. PROJECT NARRATIVE

The justification or narrative should include all information, description, and statistics necessary to explain and justify the proposed project, including:

1. Evidence of need (labor market survey, etc.),
2. Impact statement (anticipate outcome of project),
3. Work plans and estimated timelines,
4. Description and history of organization. Vitas or resumes for the project director and other key individuals are required, and,
5. Assurances of continuation; including plans for funding programs or replacing equipment following project end with funds other than the through Idaho Commission for the Blind.

If equipment is being requested, special attention should be given to justification. When applying for remodeling or new construction grants, a complete outline of the remodeling or new construction will be submitted. The outline will include a schematic diagram of the proposed facility or remodeling project.

4. EVALUATION / REPORTS

Describe evaluation methods which will be used to measure, in objective terms, the impact and success of the project. Submit any evaluation tools as part of the proposal.

Reports will be sent to the Idaho Commission for the Blind. The report will be narrative and will include information on how the grant has benefitted blind individuals being served. Unless otherwise specified in the Grant Award Notice, reports will be submitted to the Boise Office at six (6) months intervals after implementation of the project with a final report due no later than six (6) months following completion of the project. Reports will include an evaluation (to be describe in proposal) of the projects impact and success.

5. TERMS AND CONDITIONS

The undersigned hereby agrees to the terms as set forth, as to any grant award, the obligations of this agency, the state, and federal government and further agrees to supply any reports that shall be requested. The undersigned further agrees to comply with Title VI of the Civil Rights Act of 1964 (PL 88-352) and also certify that they have no commitments or obligations inconsistent with compliance of the above. I understand that the ICB may audit at any time, activities and purchases conducted under project.

Signature _____
Authorized Person

Title

Date

IDAHO COMMISSION FOR THE BLIND
REQUESTS FOR TECHNICAL ASSISTANCE

The Idaho Commission for the Blind will provide technical assistance to a rehabilitation facility interested in serving the blind and visually impaired. There are several staff persons presently employed with the Idaho Commission for the Blind with capabilities of providing expert assistance to facilities. Among these staff are:

- 1) Administrator
- 2) Adaptive Technology Specialist
- 3) Independent Living Supervisor
- 4) Job Placement Specialist
- 5) Orientation Center Supervisor
- 6) Rehabilitation Services Chief

Individuals in these positions and other ICB staff are available to provide technical assistance to facilities in developing or enhancing rehabilitation services for the blind. We encourage interested parties to consult with any of these ICB staff on either a formal or informal basis.

In addition to technical assistance, at times ICB will formally solicit bids for facility development. Cash or equipment grants may be awarded to rehabilitation providers in order to develop or enhance services to the blind. An ICB Grant Assistance Application is attached.

STANDARDS FOR COMMUNITY REHABILITATION PROGRAM

CERTIFICATION/ACCREDITATION

Introduction

In 1974, the Idaho Division of Vocational Rehabilitation provided assistance for professional surveys and accreditation for Idaho Community Rehabilitation Programs by the Commission on Accreditation of Rehabilitation Facilities (CARF). The Idaho Division of Vocational Rehabilitation (IDVR) continues to maintain a policy of accreditation by such nationally recognized organizations.

In order to assist in the establishment and expansion of new Community Rehabilitation Programs or services, IDVR may grant a one-year interim certification based upon minimum standards. This policy will allow such Community Rehabilitation Programs sufficient time to apply for and to obtain professional accreditation while receiving State assistance and providing vocational rehabilitation services as an IDVR vendor.

Establishment/Expansion of Interim Provisional Certification

New or existing Community Rehabilitation Programs with a reasonable expectation of complying with IDVR interim certification standards may request the Idaho Division of Vocational Rehabilitation Certification Team to survey the Community Rehabilitation Program in order to obtain interim certification relating to establishment (initial survey) or addition of new programs not accredited formerly (supplemental survey).

Community Rehabilitation Programs must request the State Certification Review Team to visit their Community Rehabilitation Program and review such annually until accredited. After at least one year's existence, the Community Rehabilitation Program must apply for accreditation by a national organization. ^a

The Idaho Division of Vocational Rehabilitation will review and survey certifications each year until fully accredited. The State Certification Team (CT) will visit the Community Rehabilitation Program which now sells or intends to sell services, or seek other means of support such as equipment or staffing from Vocational Rehabilitation. The CT will include but not be limited to the Chief, Bureau of Field Services; the Community Based Programs Supervisor; and any other members of the State staff as may be designated.

^a Commission on Accreditation of Rehabilitation Facilities; Joint Commission on Accreditation of Hospitals; Lighthouse for the Blind.

State certification will last one year. Renewal applications for certification must include the Community Rehabilitation Program's plans for (or progress toward) application for accreditation by a nationally recognized accrediting organization.

We have established an Administrative Procedures Act (APA) that reserves the right not to grant interim certification to any person, group of people, or organization due to a sufficient number of vendors in that particular geographic area.

Community Rehabilitation Programs in other states utilized by the Idaho Division of Vocational Rehabilitation must satisfy Vocational Rehabilitation standards in the states concerned. No certification will be issued by the Idaho Division of Vocational Rehabilitation.

CERTIFICATION STANDARDS

In order to receive IDVR provisional interim certification, the following minimum criteria must be met:

I. Organizational Standards

1. A Community Rehabilitation Program shall be, or be part of, a legal entity with a charter or constitution and by-laws which are in accordance with those legal requirements which affect its organization. **b**
2. Must have a clear statement of purpose in charter or constitution.
3. A functioning representative governing body meeting no less than quarterly.
4. An administrator responsible to the governing body.
5. A management information system in effect to adequately record, report and guide the operation.
6. A viable methodology for evaluating program results and effects, thereby enabling effective planning.
7. An appropriate system of communication between the organization and consumers to ensure effective market-based services.
8. A personnel policy related to appropriate, competent and qualified staffing plans.

b Community Rehabilitation Programs operated in conjunction with state institutions satisfy Item Nos. 1 and 3.

9. Fiscal management in accordance with sound practices, legal requirements and organizational mission.
10. A Community Rehabilitation Program or community-based operation so located, constructed, equipped and operated that a client's welfare, health and safety will not be endangered, i.e.,
 - a. Medical services must only be performed by a person licensed to provide such services under Idaho law.
 - b. Fire Marshal and Health Inspector approval of Community Rehabilitation Program's and/or community-based operation's safety procedures.
 - c. The Community Rehabilitation Program and/or community-based operation must be physically accessible to the physically handicapped. If barriers exist, reasonable plans for their elimination must exist.
 - d. Where transportation is provided, adequate safety, operational policy and legal compliance should exist.

II. Program Standards

1. Clear and appropriate intake, service and discharge criteria and procedures which include the client in decisions affecting his/her program.
2. Effective assessment tools to aid in client-based individual program planning.
3. Individual program management, i.e., comprehensive, individualized, coordinated and integrated toward result-oriented goals/outcomes.
4. Adequate client referral and supportive service utilization should exist complementary to individual program needs, including appropriate exit/discharge and follow-up provisions.
5. Appropriate case records management of client data and services as well as an internal system for program review, all of which is to be integrated into the program planning, evaluation and management process.

III. Other Interim Certification Standards

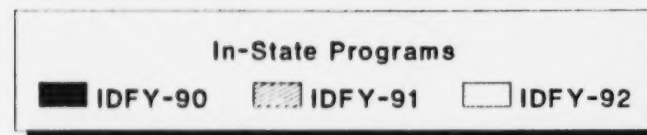
1. Certification by the Wage and Hour Public Contracts Division of the United States Department of Labor here required by law.
2. An established fee schedule supported by budget and/or performance information.
3. Adequate insurance coverage, especially industrial accident, liability and Social Security for staff and clients.
4. For rehabilitation industries evidence that:
 - a. Business is sought on a fair and competitive basis;
 - b. "Struck" work is not knowingly accepted; and
 - c. Wage payments are monetary and commensurate with those paid for similar amounts and types of work by local, commercial and other industrial establishments.
5. Reasonable personnel-to-client rations.
6. Assurance of nondiscrimination with regard to employment, promotion, pay, or place of work because of race, creed, sex, national origin, or disabling condition and organizational programs promoting the integration of those served into the community.
7. Assurance of ethical methods of publicity, promotion and solicitation of funds.
8. Assurance of protection of client confidentiality regarding information, public relations and fund raising.
9. A demonstrable system for consumer input and system impact, i.e., its programs, policies and procedures.

IV. Interim Certification Policies and Procedures

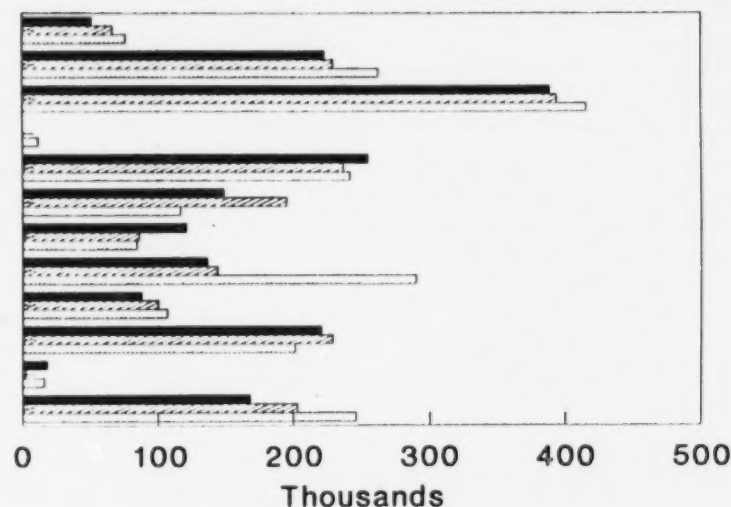
1. If the IDVR Review Team chooses not to survey or grant interim certification to a Community Rehabilitation Program, the organization will be informed of the decision in writing, and the organization will be granted an opportunity for review (appeal).
2. Also, if non-certified, a period of six months (minimum) must pass before resurvey is to be reconsidered, based upon accomplishment of corrective action plans.

3. During the period of interim certification, the organization should communicate to the IDVR Review Team any significant changes in operations, programs, or plans.
4. If a centrally interim-certified Community Rehabilitation Program/organization has intentions to develop additional locations or programs, then a supplemental survey will be requested/completed within a reasonable period of time.
5. On-site monitoring/visits may occur with or without prior notice.
6. In addition to organizational/program standards (systems review), the interim Certification Team will also assess the quality of services offered and results-oriented capability (performance review).

IDVR COMMUNITY REHABILITATION PROGRAM UTILIZATION COMPARISON IDFY 90/91/92



DAWN
DWI
EASTER SEAL\GOOLWILL
INLAND EMPIRE/GOODWL
MVRS
OUI
PANHANDLE
PRIDE
SWIFT
TESH
TRI-CO
WITCO



IDFY TOTALS (IN-STATE + OUT-OF-STATE)

90 = \$1,865,544
91 = \$1,914,586
92 = \$2,096,739

Dollar Figures represent Totals as of 103192

Dollar Figures - Idaho Facilities

DAWN
IDFY90 = \$51,012
IDFY91 = \$88,105
IDFY92 = \$78,205

DWI
IDFY90 = \$223,343
IDFY91 = \$228,891
IDFY92 = \$283,088

EASTER SEALS/GOODWILL
IDFY90 = \$388,573
IDFY91 = \$393,384
IDFY92 = \$415,242

INLAND EMPIRE GOODWILL
IDFY90 = 0
IDFY91 = 0
IDFY92 = \$11,881

MVRS
IDFY90 = \$255,058
IDFY91 = \$237,071
IDFY92 = \$241,781

OUI
IDFY90 = \$148,492
IDFY91 = \$194,887
IDFY92 = \$118,858

PANHANDLE
IDFY90 = \$121,051
IDFY91 = \$85,744
IDFY92 = \$84,122

PRIDE
IDFY90 = \$183,123
IDFY91 = \$143,827
IDFY92 = \$290,044

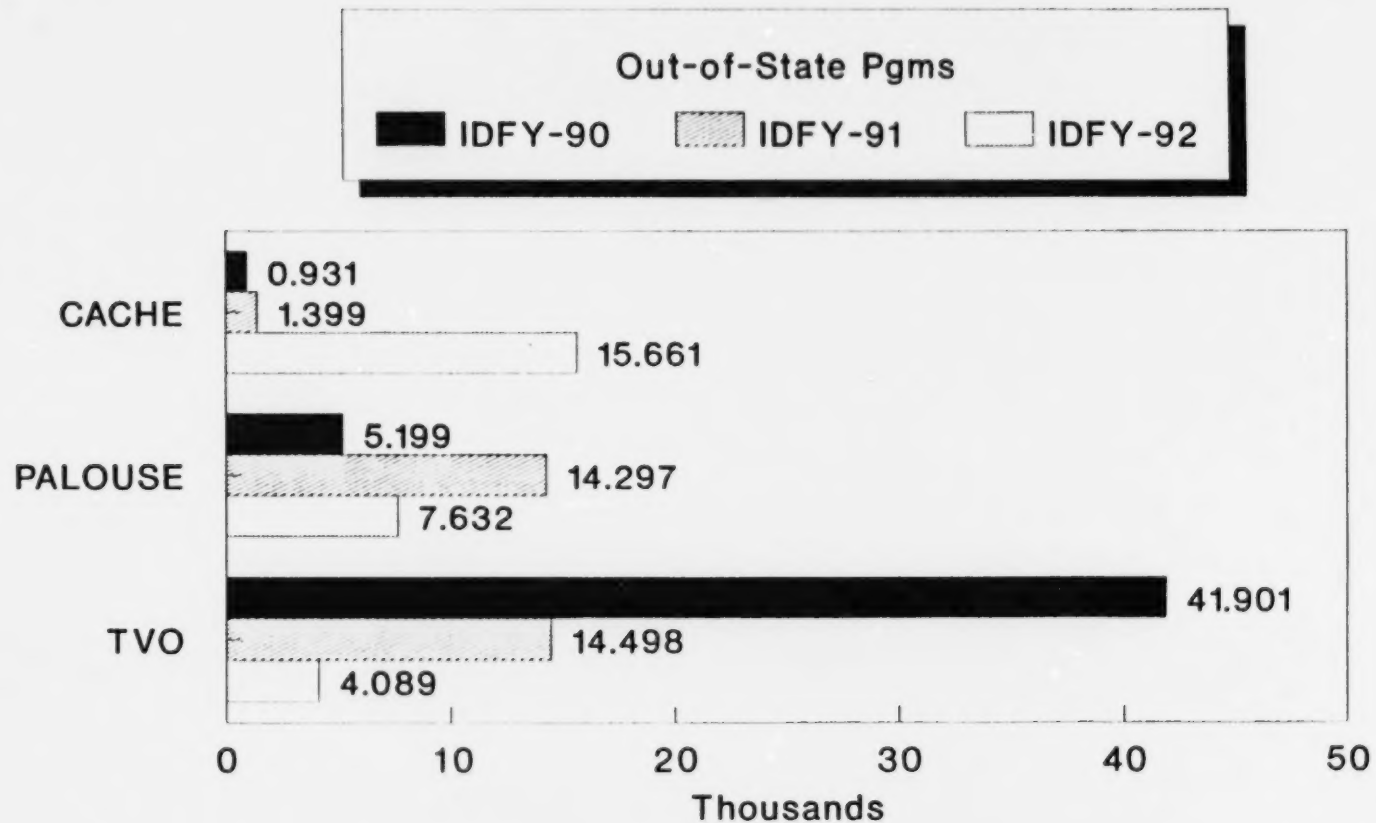
SWIFT
IDFY90 = \$87,591
IDFY91 = \$99,911
IDFY92 = \$108,804

TESH
IDFY90 = \$220,387
IDFY91 = \$228,741
IDFY92 = \$200,981

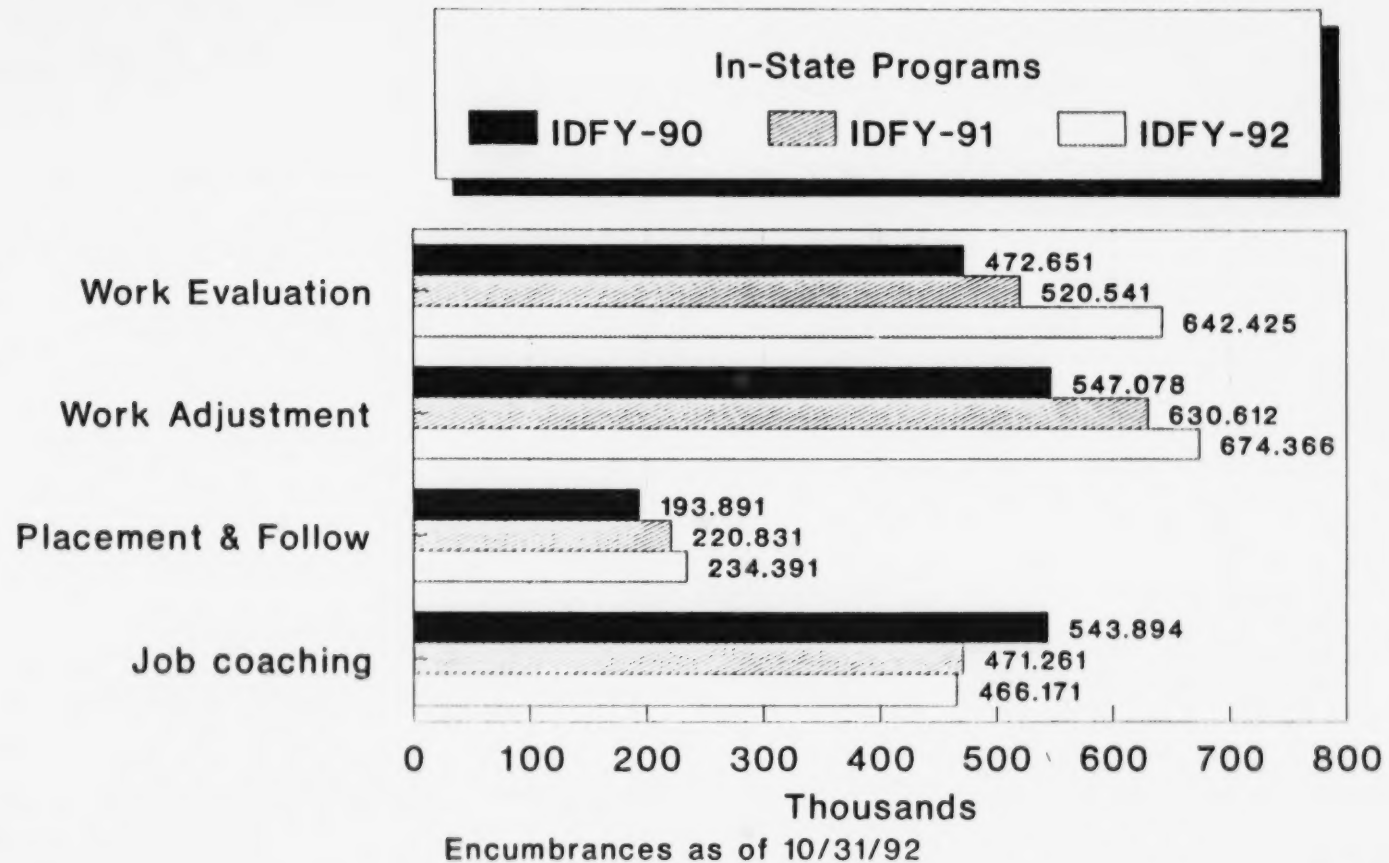
TRI-CO
IDFY90 = \$17,911
IDFY91 = \$2,251
IDFY92 = \$15,886

WITCO
IDFY90 = \$187,995
IDFY91 = \$202,803
IDFY92 = \$248,291

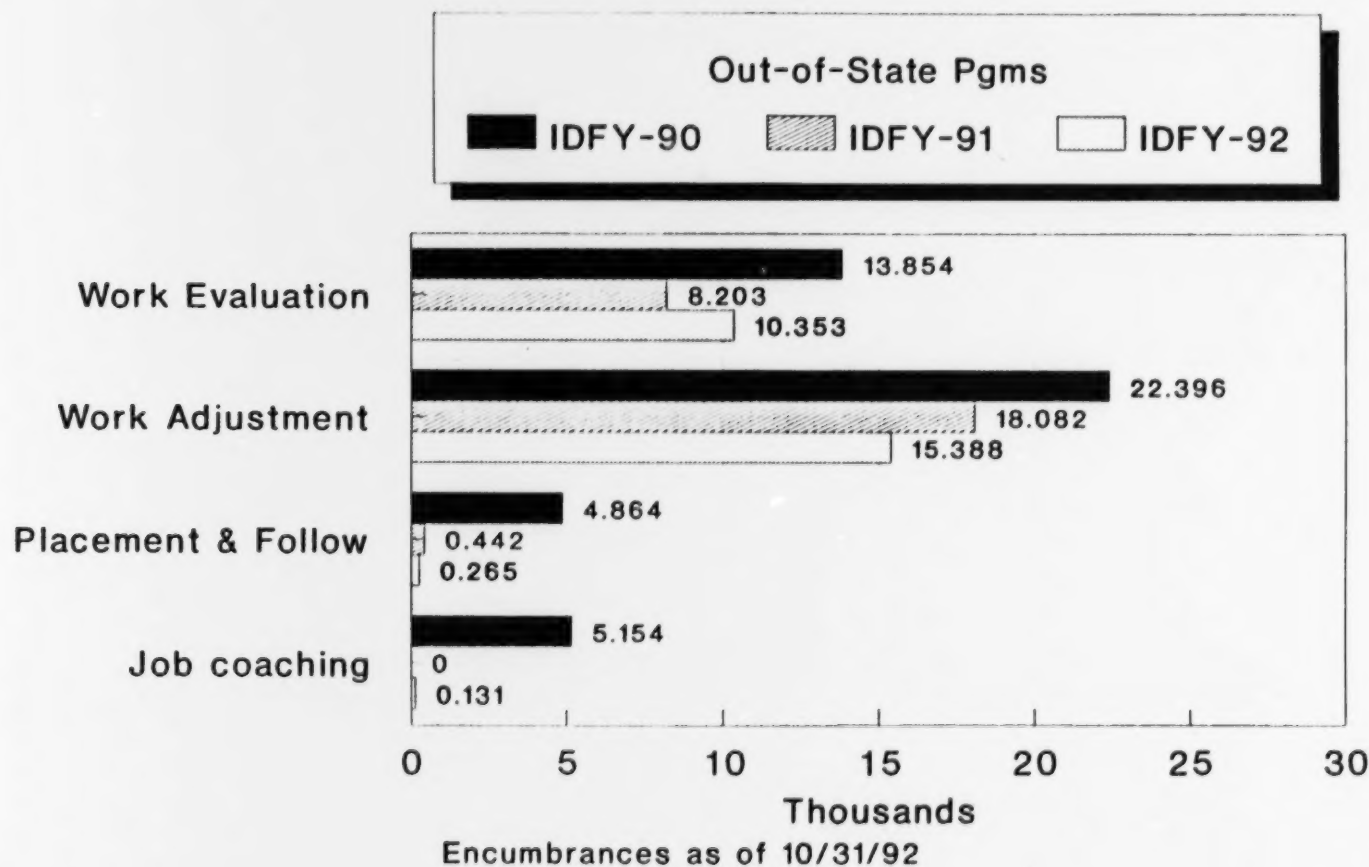
IDVR COMMUNITY REHABILITATION PROGRAM UTILIZATION COMPARISON IDFY 90/91/92



IDAHO COMMUNITY REHABILITATION PROGRAM YEAREND SERVICES UTILIZATION IDFY 90/91/92



IDAHO COMMUNITY REHABILITATION PROGRAM YEAREND SERVICES UTILIZATION IDFY 90/91/92



IDAHO COMMISSION FOR THE BLIND
REHABILITATION FACILITIES EXPENDITURES
7/01/91 - 6/30/92

<u>Service</u>	<u>MVRS</u>	<u>EQOL</u>	<u>DWI</u>	<u>OUI</u>	<u>TESH</u>	<u>WITCO</u>	<u>LIGHTHOUSE</u>	<u>LILAC</u>	<u>RBI</u>	<u>ANDERSON</u>	<u>CANNACK</u>	<u>EASTER S</u>	<u>PANHANDLE</u>
Diag and Eval	2,093		127	310	652		355		1,418	150	216	625	975
Pers and Voc Adj		23,972					845	6,534	1,920	8,980	3,204		1,215
On Job Trning				3,319									
Voc or Trade Trn													
Post Employ Svs									3,767				
Business Trning							1,008	4,066	160				
Other Services		168											
Totals:	2,093	24,140	127	3,629	652		2,208	10,600	7,265	9,130	3,420	625	2,190

<u>Services</u>	<u>Totals</u>
Diag and Eval	6,921
Pers and Voc Adj	46,670
On Job Trning	3,319
Voc or Trade Trn	
Post Employ Svs	
Business Trning	3,767
Other Services	5,402
Totals:	66,079

IDVR POLICY MEMORANDUMS
(Facility Services)

IDVR-PI-92-11

To: IDVR Regional Managers/Staff
Facility Directors/Staff

Subject: FACILITY FEE SCHEDULE - SFY 1993
WORK EVALUATIONS (INCLUDING RURAL/MOBILE)

Date: June 12, 1992

Background:

Facility service fees are set at our annual IDVR/Facility business meeting. Fees have been changed for FY 1993; however, the previous year's policy regarding work evaluation remains in effect (see attached).

Action Required:

EFFECTIVE JULY 1, 1992, IDVR-PI-91-09 IS CANCELED.

Managers and staff will need to assure that all authorizations for facility services with service dates beginning on or after July 1, 1992 coincide with the following fee schedule and procedural guidelines.

1. Fee Schedule

- Facility Based Services:

(Evaluation and Adjustment) \$ 46.40/Day

- Rural/Mobile Work Evaluation \$ 46.40/Day *

- Community Based Services:

(Evaluation, Adjustment, Job Coaching) \$ 27.35/Hour

- Placement/Follow-Along \$ 1,641/Per Placement

Note: Daily fees are based upon an 8-hour day - i.e., 6 hours direct service with 2 hours allowed for preparation and review.

2. Work Evaluations (Including Rural/Mobile)

Services are to be authorized per the following descriptors and procedural guidelines:

a) Work Evaluation

To include the estimated number of days (pre-negotiated) necessary to accomplish the evaluation objectives.

b) Staffing and Report Writing

Services of 5 days duration or more may be allowed 1 day (each) staffing and report writing. For work evaluation services of less than 5 days, then only 1/2 day (each) staffing and report writing is allowable. Exceptions to this rule must be pre-negotiated and the reasons documented in the RCR.

c) Mileage, Lodging, and Per Diem
(Rural/Mobile Work Evaluations)

Mileage, lodging, and per diem will be paid for real cost up to maximums allowed by current State Travel Regulations (Refer to IDVR-PI-90-08). IDVR will cover those costs for only one service provider. Aides or other technicians will be the responsibility of the involved vendor facility.

Note: Daily Rural/Mobile evaluation fees are based on a group consisting of 4 or more clients. The daily fee will remain in effect for the duration of the evaluation regardless of the number of clients in attendance per day.

Additional Costs (Defined)

Mileage should be determined from the evaluator's base of operation or point of origination (if different) per the State Mileage Chart (whichever is the closest). Travel outside a 65-mile radius may merit overnight lodging rather than a daily mileage allowance and should be pre-negotiated (based upon which is the most cost effective).

Lodging

Reasonable overnight accommodations are allowable when distance factors merit such consideration and are to be at government rates (commercial).

Per Diem

Full or partial per diems may be authorized per the State rate when staying overnight. Lunch per diems are allowable only when the travel is of such an extended business nature that it requires at least two (2) meals be taken away from the traveler's home base.

Note: Additional costs should be assigned to only one (1) client case.

Procedural Changes or Implications:

Effective with services starting on or after July 1, 1992 this new fee schedule is in effect. All previously negotiated fee schedules for Community Based Work Evaluation, Work Adjustment, Rural/Mobile Work Evaluation, Job Coaching, Placement, etc. are superseded by this fee schedule on a statewide basis.

*** Rural/Mobile Work Evaluation Exceptions:**

When the counselor deems that special client circumstances - i.e., geographical, personal, and medical considerations prevent a client from accessing a group evaluation, the VRC may negotiate a Community Based Work Evaluation via the hourly fee of \$ 27.35/Hour. Up to 2 hours may be allowed for both staffing and report writing. Mileage will not be paid.

Note: In the event more than 1 client needs the provision of this service (up to three), then the hourly fee will be pro-rated per each client's case.

Contact Person:

If there are any questions, please contact Gary W. Craw, Supervisor of Community Based Programs.

Termination Date: When Superseded

IDAHO REHABILITATION FACILITY ACCREDITATION/CERTIFICATION SCHEDULE

Facility	Accreditation expiration	Programs	Surveyor
Panhandle Special Needs (Sandpoint)	Feb 94	VE, WA, JP, WS, SE	CARF
TESH (Coeur d'Alene)	1994	VE, WA, JP, WS, SE, IBP	CARF
TESH (Wallace - Satellite)	"	WS	"
*Palouse Industries (Pullman, Washington)	March 93	VE, WS, WA JP, SE	Rehabilitation Services Accreditation System (RSAS)
Opportunities Unlimited (Lewiston)	Jan 94	VE, WA, JP, WS, SE	CARF
(Moscow)		VE, WA, JP, WS, SE	"
Tri-Co (Craigmont)	Nov 93	WS, SE	CARF
WITCO (Caldwell)		VE, WA, SE, JP, WS	CARF
ARC/PRIDE Enterprises (Boise)	Dec 95	VE, WA, JP, WS, PSA, RS	CARF
(Mt. Home & McCall Satellite)	Dec 91	VE, WA, JP, WS	CARF
Easter Seal (Boise)			
(Nampa - Satellite)	Feb 93	VE, WA, OST, JP, SE, IBP	CARF
Easter Seal (Idaho Falls)			
(Pocatello - Satellite)	June 92	VE, WA, CSE, PWI	CARF
MVRS (Twin Falls)			
(Burley - Satellite)	June 95	VE, WA, JP, WS, SE, P/S AS, IBP	CARF
SWIFT (Pocatello)	Sep 95	VE, WA, JP, WS, SE	CARF
Dawn Enterprises (Blackfoot)	Sep 95	VE, WA, JP, WS, PSA, RS, RP	CARF
*CACHE Industries (Logan, Utah)		VE, WA, JP, WS, PSA, PII/SE	
Development Workshop* (Idaho Falls)	Dec 94	VE, WA, OS, JP, WS, PSA, SE, IBT, RS	CARF

IDAHO REHABILITATION FACILITY ACCREDITATION/CERTIFICATION SCHEDULE
(Continued)

Facility	Accreditation expiration	Programs	Surveyor
Upper Valley Industries (Rexburg - Satellite)*	Dec 94	WA, WS, SE, IBP	CARF
Salmon River Industries (Salmon - Satellite)*	Dec 94	WA, OS, JP, WS	CARF
Elks Rehabilitation (Boise)	Feb 94	CIR/H, BI/PA	CARF
Intermountain Rehab. Ctr. (Pocatello)	April 93	CIR/H	CARF
*Goodwill Industries of the Inland Northwest (Spokane, Washington)	Oct 93	OS, JP, WS	CARF
*Dignity, Incorporated	Feb 93	VE, JP, WS, SE, IBP, PSA, RS	CARF
*Community Rehab. Center (Missoula, Montana)	July 93	CIR/H, BI/A-PA, OMR, VE, JP	CARF
*Out-of-state facilities (certifications).			

LIST OF ACCREDITED ORGANIZATIONS

The presence of an organization's name on this list means it is in basic compliance with the standards of the Commission for the type of program or programs that have been submitted for survey. Accreditation is granted to an organization in one or more program areas.

(CIR/H) (CIR/N) COMPREHENSIVE INPATIENT REHABILITATION

Comprehensive Inpatient Rehabilitation is a program of coordinated and integrated services which includes evaluation and treatment and emphasizes education and training of those served and their families. The program is applicable to those individuals who have severe disabling impairments of recent onset or recent progression, those being readmitted, or persons who have not had prior exposure to rehabilitation. Programs in this category are distinguished by their licensure and other factors, as follows: CIR/H are hospital-based programs and CIR/N are programs in skilled nursing facilities.

(SCI) SPINAL CORD INJURY PROGRAMS

A Spinal Cord Injury Program provides coordinated and integrated services for spinal cord injured persons, whether from trauma or disease, within a designated area (beds) of a rehabilitation facility, enabling those served to achieve optimal function.

(CP/I) (CP/O) (CP/I-O) CHRONIC PAIN MANAGEMENT PROGRAMS

A Chronic Pain Management Program is organized to reduce pain, improve quality of life and decrease dependence on the health care system for persons with pain which interferes with physical, psychosocial, and vocational functioning; through the provision of coordinated, goal-oriented, interdisciplinary team services. The program may operate on an inpatient, outpatient, or inpatient and outpatient basis.

(BI/A) (BI/P) (BI/A-P) BRAIN INJURY PROGRAMS

A Brain Injury Program provides categorical, goal-directed services to a population consisting principally of those with a primary diagnosis of traumatically acquired brain damage resulting in residual deficits and disability. The program provides intensive,

comprehensive services designed to prevent and/or minimize chronic disabilities while restoring the individual to the optimal level of physical, cognitive, and behavioral functioning within the context of the person, family, and the community. An acute program serves individuals who need a comprehensive inpatient program; a post acute program serves those who do not require a comprehensive inpatient rehabilitation program but who demonstrate the need for rehabilitation and specialized supportive services.

(OMR) OUTPATIENT MEDICAL REHABILITATION

Outpatient Medical Rehabilitation is defined as a program of coordinated and integrated services, evaluation, and/or treatment with emphasis on improving the functional level of the person served. Individual restorative services provided by the program are not included in this program category.

(WH) WORK HARDENING PROGRAMS

A Work Hardening Program, which is interdisciplinary in nature, uses conditioning tasks that are graded to progressively improve the biomechanical, neuromuscular, cardiovascular/metabolic, and psychosocial functions of the individual in conjunction with real or simulated work activities. Work Hardening provides a transition between acute care and return to work while addressing the issues of productivity, safety, physical tolerances, and work behaviors. Work Hardening is a highly structured, goal oriented, individualized treatment program designed to maximize the individual's ability to return to work.

(IEC) INFANT AND EARLY CHILDHOOD DEVELOPMENTAL PROGRAMS

An Infant and Early Childhood Developmental Program is structured, coordinated, and is designed to facilitate the achievement of optimum development through the provision of preventive,

evaluative, educational, and/or therapeutic services to children with disabilities or those children who are medically or environmentally at risk of developing disabilities. Families are the focal point in the process of identifying service needs and in the delivery of services. The program may be provided in the home and/or in community based out-of-home settings.

(RP) RESPITE PROGRAMS

A Respite Program is an organized program the purpose of which is to sustain the family or other primary care giver by providing that person or those persons with time-limited and temporary relief from the ongoing responsibility of care.

(IL) INDEPENDENT LIVING PROGRAM

A program designed to enhance the ability of those served to live independently. The program may be the sole function of a corporate entity, as in the case of an independent living center, or it may be one identifiable program in a constellation of other services and programs as in the instance of an Independent Living Program.

NOTE: Effective July 1, 1988 this program category was eliminated.

(AOD) ALCOHOLISM AND OTHER DRUG DEPENDENCY REHABILITATION PROGRAMS

An Alcoholism and Other Drug Dependency Rehabilitation Program is an organized program provided by interdisciplinary staff to assess and provide appropriate primary care to persons who have harmful involvement with mood-altering chemicals. It addresses both the alcoholism and other drug dependency rehabilitation needs of persons served and should also be available to significant others.

(VE) VOCATIONAL EVALUATION

Vocational Evaluation is a comprehensive process that systematically utilizes work, either real or simulated, as the focal point for assessment and vocational exploration, the purpose of which is to assist the person in vocational development.

(WA) WORK ADJUSTMENT

Work Adjustment is a transition, time-limited, systematic training program which assists persons toward their optimal level of vocational development. Utilizing real or simulated work, the intent of the program is to assist persons to understand the meaning, value, and demands of work; to learn or reestablish skills, attitudes, personal characteristics, and work behaviors; and to develop functional capacities.

(OS) OCCUPATIONAL SKILL TRAINING

Occupational Skill Training is an organized program in which a person acquires the skills necessary for a specified job title or job family. Examples of types of settings in which the standards are applicable are organization-based training programs, community-based training sites, adult education, and vocational education programs.

(JP) JOB PLACEMENT

Job Placement is a program or service organized to assist individuals to identify, obtain, and/or maintain employment commensurate with their vocational, social, psychological, and medical needs and their abilities. In addition, services are made available to employers to facilitate the successful employment of individuals with disabilities.

(WS) WORK SERVICES

Work Services is a set of services specifically designed to provide remunerative work. Work Services is applicable to all programs within the organization which typically include subcontract work, prime manufacturing or retail sales. Some persons may be involved in Work Services on a full-time basis, while other persons may only be involved for a few hours a week, spending most of their day in other services or programs.

(SE) SUPPORTED EMPLOYMENT

Supported Employment programs assist persons with disabilities who require the provision of on-going support, both on and off the job, which in not time-limited to choose, obtain, and retain paid employment in integrated settings.

(IBP) INDUSTRY-BASE PROGRAMS

Industry-Based Programs are conducted within the business/industrial community, are time limited, and are intended to result in placement into competitive or supported employment. Such programs are characterized by active involvement on the part of business and industry representatives.

(PSA) PERSONAL AND SOCIAL ADJUSTMENT SERVICES

Personal and Social Adjustment Services comprise a goal oriented program in which functional skills are developed and maintained and which provide broad opportunities for valued, non-work related adult roles in the community. This program is designed to maximize an individual's independent functioning through the provision of training in such areas as self-care, physical and emotional growth, socialization, communication, and cognitive, leisure and prevocational skills. Personal and Social Adjustment Services may be offered as alternatives to employment programs, as supplements to part time employment, or during transition to employment programs.

(RS) RESIDENTIAL SERVICES

A residence is a place where the person lives. The goal of the program is to enable those served to have the best possible quality of life through a program which is integrated into the community. Toward that end, services are typically provided in houses or apartments which provide a personalized living environment. Residential Services may be provided according to one or more of the following models: Supervised Living, Supported Independent Living, and Family Living Program.

(CMH) COMMUNITY MENTAL HEALTH ORGANIZATIONS

Community Mental Health Organizations provide an organized array of programs including, but not limited to, clinical, community support, prevention and early intervention, and systems planning and program development. Included are services and activities focused on assessing and treating individuals and/or families who are in emotional and/or psychological crisis, persons with severe and persistent mental illness, and people with life adjustment prob-

lems. Services may be provided through a variety of modalities which include, but are not limited to, outpatient, emergency services (24 hour telephone, face to face, and mobile capacity), medication management, partial/day treatment, psychosocial services, residential services (transitional, permanent, and respite), and other agencies.

(PSP) PSYCHOSOCIAL PROGRAMS

Psychosocial rehabilitation is a program organized to develop, maintain, and maximize the independent functioning of individuals with severe and/or persistent psychiatric disabilities. The program focuses on personal, social, vocational, and educational functioning and emphasizes a collaborative relationship among staff and program participants.

Vocational Evaluation

Program Description

Vocational evaluation is a comprehensive process that systematically utilizes work, either real or simulated, as the focal point for assessment and vocational exploration, the purpose of which is to assist the person in vocational development. Vocational evaluation incorporates medical, psychological, social, vocational, cultural, and economic data into the process to attain the goals of evaluation.

When real work is used as an integral part of providing the vocational evaluation program, the appropriate standards noted in bold type in Section 2-II.L, Work Services, must also be met.

1. The range and scope of the evaluation services should be sufficiently comprehensive to assess or obtain information concerning at least the following:
 - a. Physical and psychomotor capacities.
 - b. Intellectual capacities.
 - c. Work-related behaviors including, but not limited to attendance, punctuality, hygiene, social behavior, teamwork, cooperation, ability to accept criticism, ability to accept supervision, effort, initiative, perseverance, dependability, emotional stability, meeting work schedules, attention to detail, neatness in work performed, care with materials and property, and safety awareness.
 - d. Interests, attitudes, and knowledge of occupational information.
 - e. Personal, social, and work histories.
 - f. Aptitudes.
 - g. Achievements -- e.g., educational and vocational.
 - h. Work skills and work tolerances.
 - i. Job-seeking skills.
 - j. Identification of work- and nonwork-related needs and the potential to benefit from further services which are specifically identified.
 - k. Possible employment objectives, which may involve either competitive or noncompetitive employment.
 - l. The person's ability to learn about him/herself as a result of the information obtained and furnished through the evaluation experience.
 - m. Learning style, including understanding and responding to various types of instruction.
 - n. Identification of the need for tool and job-site modifications or adaptive equipment which may enhance the person's employability when his/her disability may invalidate otherwise standardized procedures.
2. When a person's disability may invalidate otherwise standardized procedures, appropriate adaptive assessment tools and methods should be used.
3. The length of time for which a person remains in vocational evaluation should be based upon the time necessary to accomplish her/her evaluation goals.
4. Evaluation data should be supplemented by personal interviews and behavioral observation.

5. In the vocational evaluation process, each person should be assessed for job areas based on his/her interests and capabilities, on opportunities in the labor market geographically accessible to him/her, and on questions asked by the referral source.
6. Based on referral information and referral questions, the initial interview, and the stated purpose of the evaluation, an individualized written evaluation plan should be developed with each person. This plan should do the following:
 - a. Identify the questions to be answered through the evaluation.
 - b. Indicate how these questions will be answered.
 - c. Periodically be reviewed and modified as necessary.
7. The vocational evaluation service should make available a variety of work settings and tasks to sufficiently meet the evaluation needs of the persons served. a vocational evaluation service should use two or more of the following techniques based on the specific abilities and needs of the persons served:
 - a. Psychometrics.
 If psychometrics are used, the selection, administration, scoring, interpretation, and reporting of all psychological and psychometric tests should be under the supervision of an individual who meets the qualifications defined by state law and by American Psychological Association standards.
 - b. Work samples using either real or simulated work.
 If work samples are used, they should meet the following criteria:
 - (1) They should be representative of realistic competitive worker traits/skills.
 - (2) Work samples should be established by an analysis of job tasks or traits related to a specific area of work and should be standardized as to materials, layout, instructions, and scoring.
 - (3) Competitive norms or industrial standards should be established and used.
 - (4) Each work sample should have an examiner's manual that specifies the following:
 - (a) Its relationship to Occupational Divisions, Worker Trait Groups, or an appropriate job analysis system.
 - (b) Prerequisites -- e.g., any specific task requirements which might make administration unfeasible for a given individual.
 - (c) The purpose of the work sample -- e.g., specifically what the sample is attempting to assess.
 - (d) Materials and equipment used.
 - (e) Preparation for testing and the layout of materials.
 - (f) Instructions to the person served.
 - (g) Instructions for timing, evaluating errors, and scoring, if applicable.
 - (h) Instructions for interpreting scores.

(c) Simulated Job Stations

If simulated job stations are used, the person's job performance should be evaluated against competitive industrial standards -- e.g., quality, quantity, and physical demands.

(d) On-the-Job Evaluation

If on-the-job evaluation is used, each job site should be evaluated as to its appropriateness with regard to the following:

- (1) Adequate supervision.
- (2) Appropriate safety.
- (3) Physical accessibility.
- (4) Transportation accessibility.
- (5) Competitiveness of work tasks and demands.

8. For each person served in vocational evaluation, a written functional evaluation report should be prepared, properly interpreted to the person served, and disseminated in a timely fashion to the program manager, referral source, and other appropriated agencies or individuals.
9. At the completion of the evaluation, the goals of the persons served should be expressed as job possibilities. In terminology such as job titles or job families related to existing occupations in the community. When these goals are not determined, alternative goals should be specified.
10. Equipment used in vocational evaluation should sample the skills and abilities required by competitive industry. The selection of equipment should be based on the capability of the person served and should be suitable to the local job opportunities available to the person.
11. Vocational evaluation services should be provided by or under the supervision of an individual who is a vocational evaluator or a vocational specialist.

Work Adjustment

Program Description

Work adjustment is a transitional, time-limited, systematic training program which assists persons toward their optimal level of vocational development. Utilizing real or simulated work, the intent of the program is to assist persons to understand the meaning, value, and demands of work; to learn or re-establish skills, attitudes, personal characteristics, and work behaviors; and, to develop functional capacities. Work adjustment services may require environment accommodations.

A program designed to provide the skill training necessary for placement in a specific job title or job family is not included in these standards.

When real work is used as an integral part of the work adjustment program, the appropriate standards in Section 2-II.L, Work Services, must also be met.

1. Work adjustment services should make provision for, but not be limited to, the development of the following:
 - a. Physical capacities - e.g., sitting, standing, and general work stamina.
 - b. Psychomotor skills - e.g., hand-eye coordination, finger dexterity, and tool usage.
 - c. Interpersonal and communicative skills - e.g., relations with supervisors and co-workers.
 - d. Work behaviors and characteristics - e.g., attendance, punctuality, dress, and grooming.
 - e. Skills necessary to find and keep a job - e.g., interviewing, filling out applications, and understanding performance appraisals.
 - f. Work performance skills - e.g., ability to perform a certain quality and quantity of work and work pacing.
 - g. Work-related functional living skills - e.g., time management, mobility, and money management skills.
 - h. Functional literacy skills.
 - i. Knowledge of work practices - e.g., knowledge of payroll deductions, insurance, unions, retirement benefits, and safety.
2. An individualized, written work adjustment plan should be developed with each person based on previous relevant assessment findings. This plan should do the following:
 - a. Specify in observable, measurable terms the behaviors that interfere with the person's achievement of vocational objectives.
 - b. Include a statement that identifies expected outcomes in functional and measurable terms.
 - c. Specify the date of implementation and the date of projected outcomes.
 - d. Specify work assignments and/or environments that are consistent with the person's work adjustment goals and relevant to the current geographical labor market.
 - e. Specify treatment techniques and methods.
 - f. Specify responsibilities of the person served, staff members, related professionals, and other individuals who will be involved in carrying out

the plan. There should be evidence that these individuals are aware of their role in carrying out this plan.

- g. Indicate a periodic review at specified intervals to determine the progress that has been made toward the attainment of each objective. Modification and the rationale for modification to the plan should be documented.
3. In work adjustment services, the procedures used in administering work adjustment techniques and methods, including modeling, behavior management, role playing, etc., should be in written form and should contain all pertinent information necessary for appropriate and uniform application of the techniques.
4. The work adjustment methods should be selected to meet individual needs as stated in the work adjustment plan.
5. The length of time that a person remains in work adjustment should be based on the time necessary to accomplish the person's adjustment goals.
6. Work adjustment services should be provided by or under the supervision of an individual who is a work adjustment specialist or a vocational specialist.

Occupational Skill Training

Program Description

Occupational skill training is an organized program in which a person acquires the skills necessary for a specified job title or job family. Examples of types of settings in which the standards are applicable are organization-based training programs, community-based training sites, adult education programs, and vocational education programs. A work adjustment training program that is intended primarily to change work behaviors and attitudes is not included in this section.

When real work is used as an integral part of the occupational skill training program, the appropriate standards in Section 2-II.L, Work Services, must also be met.

When community-based sites are utilized in occupational skill training, the appropriate standards in Section 2-II.N, Industry-Based Programs, must also be met.

1. The organization should identify available placement opportunities before implementing the training course. This supporting evidence can be obtained from want ads, private industry advisory groups, public employment services, production job orders, and placement rates. The information on placement opportunities should be reviewed at least annually to determine if the course should be adjusted, modified, or discontinued.
2. There should be an assessment of the appropriateness of the occupational skill training objective for each person. This assessment may be in the form of prior written evaluation recommendations. In lieu of that, a person may spend a specified period of time in training to assess the likelihood of a successful outcome.
3. Each person in training should be covered by an individual plan. In addition to the other information required, as it relates to occupational skill training, this plan should specify the following:
 - a. The job or job family that is the training objective.
 - b. Provisions for obtaining functional literacy necessary for accomplishing the training objective.
 - c. When indicated, the reasonable accommodations that will be made in the training program to enhance the person's ability to complete the training.
 - d. When indicated, recommendations for accommodations necessary to perform the job.
4. Information regarding the capabilities of the person served and his/her functional limitations with the appropriate techniques to remediate them should be communicated to instructional personnel.
5. For each training course, there should be a course description which specifies the following:
 - a. The planned length of the course.
 - b. The areas or topics to be covered or taught.
 - c. The materials, equipment, tools, etc., that will be used.
 - d. The training location, if outside the organization.
6. For each training course, there should be a course outline and/or curriculum that specifies the following:

- a. The minimum requirements necessary to participate in screening, orientation, etc.
 - b. The training objectives.
 - c. The sequence of topics or areas covered, when appropriate.
 - d. The performance standards against which progress will be assessed and the methods of assessment.
 - e. The method(s) of instruction.
 - f. The requirements for course extension or completion.
 - g. The job-related work behaviors that will be addressed in the course.
 - h. The proper health and safety procedures related to the job or job family.
7. There should be an organized review, at least every two years, of curriculum content, materials, and equipment so that there is continuing relevance. Examples of review mechanisms include, but are not limited to, a staff committee and a business or industry advisory council. There should be an assessment as to whether the skills and equipment used in a training course can be generalized or transferred to those used in industry in that job or job family.
8. Persons served should be informed of occupational trends in the specific area of training. Included should be such information as current openings, average starting salary, career advancement opportunities, and projected growth in specific areas of training.
9. There should be written policies that explain the handling of work performed for others by persons in training. These policies should cover such areas as for whom the work will be performed, by whom the work will be paid for, and how payment will be received and recorded.

Industry-Based Programs

Program Description

Industry-based programs are conducted within the business/industrial community, are time-limited, and are intended to result in placement into competitive or supported employment. Such programs are characterized by active involvement on the part of business and industry representatives through business advisory councils, hands-on training of program participants, etc. When industry based programs are provided, work adjustment, vocational evaluation, work services, and/or occupational skill training may also be provided.

1. The design and implementation of the program provides opportunities for optimal integration of the person with a disability into the work environment that is consistent with industry practices, including the following:
 - a. Opportunities for work site integration should be promoted during the organization's marketing and job development activities with the industry.
 - b. Integration at the work site should be promoted through social interaction, physical proximity, participation in social activities available to all employees, and opportunities for supervision by non-program staff members.
2. Integration into job-related social activities should be facilitated.
3. The organization should encourage the presence and participation of the persons served in their communities.
4. Whenever possible, the person served should travel to and from work using generic forms of community transportation - e.g., carpools, co-workers, self, or public transportation. If such transportation cannot be arranged, the organization should coordinate or provide available transportation.
5. The organization should assist the person served to understand the impact of employment on disability benefits as well as other benefits and should assist him/her to become knowledgeable about access to such benefits.
6. Persons served should be informed of placement services and of policies regarding transfer and re-entry.
7. The person's plan for services in the industry-based program should be reviewed at least semi-annually.
8. The person's potential for regular competitive employment or supported employment should be assessed at semi-annually.
9. Persons accepted in industry-based programs and awaiting placement, or persons needing other placements, should have their plans reviewed every 30 days. Consultation should occur with the person served, other appropriate members of the professional staff, and/or the referral source to determine if the plan should be amended.
10. The program evaluation system in the industry-based program should address a variety of measures, some of which should be as follows:
 - a. Average number of weeks worked in the industry site.
 - b. Average number of hours worked per week.
 - c. Number of successful competitive placements.
 - d. Number of successful supported employment placements.

- e. Number of successful placements, classified by severity of disability.
 - f. Earnings and benefits.
 - g. Job retention.
 - h. Job advancement.
 - i. Length of time from referral to placement.
11. When the organization provides supervision and training at the work site, the supervisor or trainer should be knowledgeable of the type of work and programmatic aspects of the assignment. Provisions for supervision at the work site should include both immediate supervision of the person served in the case of emergencies and supervision for planned absences as well. The information should be communicated to appropriate parties in writing.
 12. The design and implementation of the program should reflect close cooperation between the organization and significant elements - e.g., employers, unions, community resources, persons served, advocates, etc. This cooperation may be accomplished in part by the use of a business advisory council.
 13. A written service agreement between the organization and the employer should specify, at a minimum, the following:
 - a. Roles and responsibilities of each party over time.
 - b. Compensation.
 - c. Insurance and other benefits.
 - d. Hiring decisions.
 - e. Conditions for amendment or termination of the service agreement.
 - f. Appropriate confidentiality related to persons served.
 14. The person served should be informed of the conditions of the service agreement.
 15. There should be clear lines of communication between program staff members and appropriate individuals at the work site to sustain mutually beneficial services as indicated in the service agreement.
 16. The work and the work site should reflect an awareness of sound health and safety practices. Provision for meeting safety and health standards should apply uniformly to all persons.

Job Placement

Program Description

Job placement is a program or service organized to assist persons to identify, obtain, and/or maintain employment commensurate with their vocational, social, psychological, and medical needs and their abilities. In addition, services are made available to employers to facilitate the successful employment of persons with disabilities. These standards are not applicable when job placement intentionally is provided only on an incidental and infrequent basis.

1. Job placement services are provided or made available to assist persons to identify, obtain, maintain, and/or advance in employment. Provided on an organized, planned basis, these services should include, but not be limited to, preparation of the person for employment, job development and placement, follow-up, and post-employment services.
2. A written placement plan should be developed for each person served in Job Placement. This plan should do the following:
 - a. Integrate the results and/or recommendations from other services.
 - b. Contain the job objective(s) and the roles and responsibilities of the individual providing placement and the person served.
 - c. Specify length of time for which follow-up contact will be maintained, primarily based on the person's needs.
3. Employment preparation services should include the following:
 - a. Assessing the appropriateness of the referral for job placement services.
 - b. Analyzing pertinent findings from medical, psychological, or prior vocational services and/or work adjustment services in order to maximize the person's employment opportunities, job performance, job satisfaction, job retention, and special considerations determined by living arrangements.
 - c. Counseling and/or training of individuals and/or groups regarding the techniques for obtaining and maintaining employment.
 - d. Assisting the persons served to become knowledgeable about job duties, personnel benefits, rates of pay, employment policies and practices, and the job location prior to job acceptance.
 - e. Eliciting information about job preference, salary expectations and needs, insurance needs, transportation needs, and hours and days that the person is available to work.
 - f. Assisting the person served to become knowledgeable regarding the impact of employment on disability and other benefits as well as providing information on the means available to access such benefits.
4. Job development and placement services should include the following:
 - a. Contacting employers to develop and/or identify job opportunities for persons with disabilities.
 - b. Providing on-site job analysis, consultation, and recommendations for work site and job modification, when appropriate.
 - c. Assisting employers to identify, modify, and/or eliminate architectural, procedural, instructional/communication, and/or attitudinal barriers to the employment and advancement of persons with disabilities.

- d. Educating employers about various disabilities and resulting vocational implications, assistive devices, job accommodations, services provided by the organization, incentives to the employer, and current disability-related legislation affecting the employer.
 - e. Maintaining communication and coordination with other community agencies and resources.
 - f. Maintaining an organized system of recording job openings including the names of employers, persons referred, actions taken, etc.
 - g. Providing feedback of information to other staff members regarding community employment opportunities and labor market trends.
5. The organization should adopt a policy with regard to the placement of persons served in businesses being struck.
6. Follow-up and post-employment services should include the following:
- a. Initial contact within one week between the employed person and with the employer when this is appropriate in consideration of the prior relationship.
 - b. The availability of appropriate personnel for the person and/or employer during and, if feasible, after regular working hours to provide support services, if required.
 - c. The maintenance of contact for a reasonable period of time to promote adequate job adjustment and retention.
 - d. The availability of services, including placement, for persons who are unsuccessful in maintaining employment.
7. Persons referred for job placement services who have not been placed should have their plans reviewed at least every 30 days. Consultation should occur with the person, other appropriate members of the professional staff, and/or the referral source to determine if the placement plan should be amended.
8. Records of persons who have been placed in outside employment should contain, at a minimum, the following information:
- a. Place of employment.
 - b. Job title.
 - c. Rate of pay and fringe benefits.
 - d. Date on which employment commenced.
 - e. Employment status 60 days following commencement.
 - f. Name of the immediate supervisor, if available, at the work site.

Supported Employment

Program Description

Supported employment programs assist persons with disabilities who require ongoing support, both on and off the job, which is not time-limited, in order to choose, obtain, and retain paid employment in integrated settings.

Transitional employment is a variant of supported employment. Such programs may be included in this section.

1. The design and implementation of the program provides opportunities for optimal integration of the person with a disability into the work environment that is consistent with industry practices. This integration should result in the presence and participation of persons served in natural proportions in both work and non-work activities.

Supported employment programs should include the following activities:

- a. Opportunities for work site integration should be promoted during the organization's marketing and job development activities within the industry.
 - b. Integration at the work site should be promoted through social interaction, physical proximity, participation in social activities available to all employees, and opportunities for supervision by non-program staff members.
2. The organization should develop a written policy that guides the development of its supported employment program to determine the size and composition of the work sites. This policy should be based upon the organization's own values. Factors to be considered include numbers of people without disabilities, preferences of the persons served, and opportunities for interaction with people without disabilities.
 3. Integration in job-related social activities should be facilitated.
 4. the organization should encourage the presence and participation of the persons served in their communities.
 5. Whenever possible, the person served should travel to and from work using generic forms of community transportation - e.g., carpools, co-workers, self, or public transportation. If such transportation cannot be arranged, the organization should coordinate or provide available transportation.
 6. Organizations involved in the transportation of people and/or materials provided by the organization should meet the standards in Section 1-I.14 through 1-I.22.
 7. The organization should define the selection process for persons to be served in supported employment. The organization must demonstrate that all persons served, without regard to the severity of their disabilities have access to its supported employment program.
 8. The organization should assist the person served to understand the impact of employment on disability benefits as well as other benefits and assist him/her to become knowledgeable about access to such benefits.
 9. The persons served should be informed of supported employment options and of policies regarding transfer and re-entry.
 10. Each person should have an individual written plan that, at a minimum, includes the following:

- a. An assessment of the person's performance at the actual work site, including attention to environmental factors, in order to determine the following:
 - (1) Individual interests and preferences. (2) Work Skills.
 - (3) Functional skills. (4) Behavioral functioning.
- b. Short- and long-term support needed, including necessary financial resources.
- c. The wage range for the job.
- d. The best job match.
- e. Optimum integration and independence.
- f. Utilization of generic integrated community resources to meet non-work needs.
- g. Career options.
- h. Follow-along services.
- 11. The person's plan for services in the supported employment program should be reviewed at least semi-annually.
- 12. A documented system should be in place to provide organized follow-along support contacts at regular intervals with the person served. As appropriate, contact at regular intervals should be made with the employer and significant others.
- 13. The person's potential for regular competitive employment should be assessed at least semi-annually.
- 14. Persons accepted for supported employment and awaiting placement or persons needing other placements should have their plans reviewed every 30 days. Consultation should occur with the person served, other appropriate members of the professional staff, and/or the referral source to determine if the plan should be amended.
- 15. The program evaluation system in a supported employment program should address a variety of measures, some of which should be as follows:
 - a. Average number of weeks worked.
 - b. Average number of hours worked per week.
 - c. Earnings and benefits.
 - d. Job retention.
 - e. Job advancement.
 - f. Job changes.
 - g. Length of time from referral to placement.
 - h. Type and amount of staff member intervention.
 - i. Integration.
 - j. Number of successful placements, classified by severity of disability.

16. The program should maintain, as appropriate, close communication with the family and others who are likely to influence the probability of a successful outcome.
17. When the organization provides supervision and training at the work site, the supervisor or trainer should be knowledgeable of the type of work performed in the assignment. Provisions for supervision at the work site should include both immediate supervision of the person served in the case of emergencies and supervision for planned absences as well. The information should be communicated to appropriate parties in writing.
18. Sound and acceptable pricing practices should be observed in all business and industrial activities, including purchase of materials, sale of products, and subcontracting for all service approaches for supported employment including individual, group, and other strategies.
19. The trainer or supervisor should be knowledgeable in the rehabilitation techniques appropriate to the persons served and should have the capacity to support and promote adequate performance.
20. The organization should define and provide for the orientation and ongoing training needs of staff members of the supported employment program, which should include some of the following:
 - a. Introduction to disability.
 - b. Philosophy of the organization in such areas as personal dignity, family interactions, and participation in community life.
 - c. Individual rights and how to assist persons to secure and exercise those rights.
 - d. Achieving community integration.
 - e. Positive training and support.
 - f. Confidentiality.
 - g. Conflict resolution.
 - h. Prevention/reporting of neglect and abuse.
 - i. Functional skills training.
 - j. Characteristics of persons served - e.g., means of communication, required degree of supervision, guardianship, special needs, medications, and general health.
 - k. Incident reporting.
 - l. Social skills training.
 - m. Communication and active listening skills.
 - n. Documentation and record keeping.
 - o. Behavior management practices.
21. The design and implementation of the program should reflect close cooperation between the organization and significant elements - e.g., employers, unions, community resources, persons served, advocates, etc. This cooperation may be accomplished in part by the use of a business advisory council.
22. A written service agreement between the organization and the employer should specify, at a minimum, the following:

- a. Roles and responsibilities of each party over time.
 - b. Compensation.
 - c. Insurance and other benefits.
 - d. Hiring decisions.
 - e. Conditions for amendment or termination of the service agreement.
 - f. Appropriate confidentiality related to persons employed.
23. The person served should be informed of the conditions of the service agreement.
 24. In conjunction with the industry, the following job site training functions should be provided in writing:
 - a. Job specifications and/or task analyses.
 - b. A systematic plan of instruction and/or support in work skills and behaviors to be acquired.
 - c. A plan to develop appropriate social and interpersonal skills necessary to retain employment.
 - d. When appropriate, a plan to transfer supervision and/or support from the organization to the business and industry.
 25. There should be clear lines of communication between program staff members and appropriate individuals in the work site to sustain mutually beneficial services as indicated in the service agreement.
 26. The work and the work site should reflect an awareness of sound health and safety practices. Provisions for meeting safety and health standards should apply uniformly to all persons.
 27. Health and other special considerations should be taken into account in the work placement of the persons served. Such considerations as well as emergency contact number(s) and procedures should be clearly communicated in writing to supervisory personnel.
 28. Work sites should be appropriately accessible to the people referred.
 29. All persons should have equal opportunity to use appropriate equipment. As part of reasonable accommodation, there should be modified equipment, jigs and fixtures, and other techniques as necessary to increase the person's productivity rate, provide greater safety in equipment use, and enhance earning potential. Other forms of accommodation may include, but not be limited to modification of the work site and commonly used surrounding areas; purchase of assistive aids and devices; adoption of personnel policies that allow the use of extended rest periods, flextime, part-time, etc.; reassignment of nonessential tasks; and task training.
 30. Prevailing competitive wage rates should be sought for the person served prior to consideration of sub-minimum wage certificates. A person paid less than minimum wage should be covered by a Department of Labor certificate, as applicable.
 31. When sub-minimum wages are paid there should be industrial norms based on the average productivity of workers in the same work place who are not job handicapped performing similar jobs, as established by an accepted system of work measurement such as time studies, Methods-Time-Measurement, Modular Assessment of Pre-determined Time Standards (MODAPTS), etc.

32. Persons served in supported employment should be compensated using the principle of commensurate wages.
33. The person who is paid at or above the prevailing wage on a consistent basis and who meets all other criteria for regular competitive employment should be classified as an employee and should receive usual employee benefits.
34. Wage rates and production norms should be reviewed and adjusted whenever the methods of performing a work task are changed.
35. Each person's wages and work performance should be reviewed at least every six months.
36. Wage payments should be based on a system of individual performance rather than pooled and/or group wage payments.
37. Wage payments should be of a monetary nature and not payments in kind.
38. The pay period should not exceed 31 calendar days.
39. Each person should receive a written statement for each pay period indicating gross pay, hours worked, deductions, and net pay.
40. Wages paid each person should be paid in full for all work performed during the period. Persons engaged in the production of products or the provision of services should not have wage payments delayed because they are contingent upon subsequent sales or payments.
41. There should be no charge to the person for the privilege of employment per se. There may, however, be appropriate charges for transportation, uniforms, meals, and lodging. An invoice should be submitted to the person served, the legal guardian, or a third-party sponsor.
42. When the organization generates the payroll check, the following records and information should be maintained:
 - a. Employee identification data.
 - b. The name and address of the personal representative, conservator, guardian, and/or representative payee, if one has been appointed for the employee.
 - c. The person's work history.
 - d. Pertinent information about the job assignments.
 - e. The employment application.
 - f. The emergency contact number.
 - g. Attendance records.
 - h. Payroll records.
43. For all persons served, the organization should maintain the following records and information:
 - a. The name of the work supervisor.
 - b. The rate of pay, earnings, and fringe benefits.
 - c. The date of employment.
 - d. Information on work progress.

- e. Information on performance review, when possible.
 - f. Special work considerations.
 - g. Employer termination report(s), when possible.
 - h. Emergency contact number(s).
 - i. Immigration/naturalization status.
44. If the organization generates the payroll check, the program should prepare a handbook that is presented to the person served in a manner that is understandable to that person and that is periodically reviewed, outlining the following:
- a. The conditions, benefits, and responsibilities of each party.
 - b. Fringe benefits.
 - c. Wage payment practices.
 - d. Work rules.
 - e. Nondiscrimination provisions.
 - f. Grievance and appeal procedures.
45. The program should adopt a policy with regard to struck work and the placement of persons in businesses being struck.